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Office of the Medical Examiner State of Kentucky 2017 Annual Report

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Overview



Introduction

The Office of the Medical Examiner investigates deaths occurring in the state of Kentucky, as authorized by Kentucky's elected coroners. The staff assists Kentucky coroners and law enforcement agencies in all aspects of death investigations by determination of the cause and manner of death, identification of the deceased, and collection and interpretation of trace evidence. The Medical Examiner Division performed services for approximately 2,471 deaths. A detailed summary of the case distribution is delineated in this report. It should be noted that this annual report does not include all deaths occurring in Kentucky, but rather those cases investigated by the Kentucky Medical Examiner Program. For total numbers of deaths occurring in the state, please contact:

Office of Vital Statistics 275 E. Main St. 1EA Frankfort, KY 40621 (502) 564-4212

The following report is presented in two sections. The first section summarizes the activity of the Medical Examiner's Office. The second section presents data routinely collected by the Medical Examiner's Office in regards to medicolegal death investigations performed. The graphs and figures presented are designed to be self-explanatory and provide the reader with a brief understanding of the types of cases completed within this Division.

Overview—Office of the Medical Examiner – 2017

The Medical Examiners Office performs death investigations and postmortem examinations at four separate regional offices around the state:

- The Office of the Chief Medical Examiner in Louisville, KY
- The Eastern Kentucky Regional Medical Examiner in Frankfort, KY
- The Western Kentucky Regional Medical Examiners Office in Madisonville, KY
- The Northern Kentucky Regional Medical Examiners Office in Ft. Thomas, KY

There are six basic functions of the Office of the Medical Examiner:

- determine the cause and manner of death of individual decedents in a timely fashion
- identify the dead with a high degree of certainty and written documentation
- prepare and maintain accurate, thorough and timely reports regarding examinations and opinions
- safeguard and account for evidence and personal property
- maintain confidentiality of case information
- base expert opinions on logical conclusions after considering all historical and physical evidence available, in light of current scientific and medical knowledge

All medical examiner offices in Kentucky are staffed by board certified and/or board eligible forensic pathologists. These forensic pathologists are physicians who have undergone at least five years of postgraduate training to become proficient in the subspecialty of forensic pathology. The forensic pathologists routinely perform postmortem examinations; consult with law enforcement officials and attorneys regarding aspects of investigations including blood spatter analysis, crime scene investigation and toxicology interpretation; meet with decedents' families; and provide expert testimony in courts throughout Kentucky.



Our Mission

The mission of the Kentucky Medical Examiners Office is to serve the public by:

- providing accurate, thorough and efficient medical legal investigations of death, thereby,
- ensuring justice, and
- providing solace, comfort and protection to the living

Reportable Deaths

KRS 72.025 Circumstances requiring post-mortem examination to be performed by coroner.

Coroners shall require a post-mortem examination to be performed in the following circumstances:

- (1) When the death of a human being appears to be caused by homicide or violence;
- (2) When the death of a human being appears to be the result of suicide;
- (3) When the death of a human being appears to be the result of the presence of drugs or poisons in the body;
- (4) When the death of a human being appears to be the result of a motor vehicle accident and the operator of the motor vehicle left the scene of the accident or the body was found in or near a roadway or railroad;
- (5) When the death of a human being occurs while the person is in a state mental institution or mental hospital when there is no previous medical history to explain the death, or while the person is in police custody, a jail or penal institution;
- (6) When the death of a human being occurs in a motor vehicle accident and when an external examination of the body does not reveal a lethal traumatic injury;
- (7) When the death of a human being appears to be the result of a fire or explosion;
- (8) When the death of a child appears to indicate child abuse prior to the death;
- (9) When the manner of death appears to be other than natural;
- (10) When human skeletonized remains are found;
- (11) When post-mortem decomposition of a human corpse exists to the extent that external examination of the corpse cannot rule out injury or where the circumstances of death cannot rule out the commission of a crime;
- (12) When the death of a human being appears to be the result of drowning;
- (13) When the death of an infant appears to be caused by sudden infant death syndrome in that the infant has no previous medical history to explain the death;
- (14) When the death of a human being occurs as a result of an accident;
- (15) When the death of a human being occurs under the age of forty (40) and there is no past medical history to explain the death;
- (16) When the death of a human being occurs at the work site and there is no apparent cause of death such as an injury or when industrial toxics may have contributed to the cause of death;
- (17) When the body is to be cremated and there is no past medical history to explain the death;
- (18) When the death of a human being is sudden and unexplained; and
- (19) When the death of a human being occurs and the decedent is not receiving treatment by a licensed physician and there is no ascertainable medical history to indicate the cause of death.

Effective: July 15, 1998



Kentucky's Combined Coroner-Medical Examiner System

- (1) The coroner determines whether the case becomes a medical examiner case.
- (2) "Post-mortem examination" as discussed in KRS 72, is not defined as an autopsy. Not all circumstances defined by KRS 72.025 will be referred to the State Medical Examiners System, rather they will be investigated solely by the Coroner.
- (3) The medical examiner and the coroner may discuss whether a complete autopsy, a focused examination, or external inspection with toxicology specimen acquisition is warranted on certain cases. The Medical Examiner makes a MEDICAL DECISION regarding the type and amount of examination done to render a medicolegal opinion and thus provide assistance to the coroner. In all cases submitted by a coroner with an authorization, a report including a final opinion is generated.
- (4) In the rare event that the coroner declines to authorize an examination by the Medical Examiner's office in a case in which law enforcement investigators conclude that ME involvement is crucial, then law enforcement may obtain and authorize an examination by the ME office by procuring a court order through the Commonwealth Attorney's Office.
- (5) In any case undergoing examination by a Kentucky ME, the ME performing the examination renders an official opinion regarding both cause and manner of death.

Statutory Duty

72.210 Purpose of Division of Kentucky State Medical Examiners Office.

In enacting legislation establishing a Division of Kentucky State Medical Examiners Office for the Commonwealth of Kentucky, it is not the intention of the General Assembly to abolish or interfere with the coroner in his role as a constitutionally elected peace officer. It is the intention of the General Assembly for the office to aid, assist, and complement the coroner in the performance of his duties by providing medical assistance to him in determining causes of death.

Effective: July 15, 1998

History: Amended 1998 Ky. Acts ch. 65, sec. 4, effective July 15, 1998. -- Created

1968 Ky. Acts ch. 114, sec. 1.



Medical Examiner Regional Offices

Kentucky has four regional medical examiner offices throughout the Commonwealth. Each office provides coverage to counties within their designated region. These four medical examiners offices together performed 2,471 postmortem examinations in 2017.

The Office of the Chief Medical Examiner (OCME)

Physician/Doctorate Staff

- Darius Arabadjief, MD
- Amy Burrows-Beckham, MD
- Randall Falls, DO
- William Ralston, MD
 - Chief Medical Examiner
- Jeffrey Springer, MD
- Donna Stewart, MD

Mailing Address

Office of the Chief Medical Examiner (OCME) Bingham Building, 1st Floor 10511 LaGrange Rd, Louisville, KY 40223

Phone Numbers

Telephone: (502) 489-5209

Fax: (502) 489-5213

Regional Coverage

The OCME covers the following **CENTRAL** counties in Kentucky:

Adair, Allen, Barren, Breckinridge, Bullitt, Butler, Carroll, Casey, Clinton, Cumberland, Edmonson, Grayson, Green, Hancock, Hardin, Hart, Henry, Jefferson, Larue, Marion, Meade, Metcalfe, Monroe, Nelson, Oldham, Russell, Shelby, Simpson, Spencer, Taylor, Trimble, and Warren.

The OCME also provides coverage for the following Southern Indiana counties:

Southern Indiana counties: Clark, Crawford, Dearborn, Dubois, Floyd, Harrison, Jackson, Jefferson, Ohio, Orange, Perry, Scott, Spencer, Switzerland, Warrick, and Washington.

The Eastern Kentucky Regional Medical Examiners Office (EKME)

Physician/Doctorate Staff

- Meredith Frame, MD
- Lauren Lippincott, DO

Mailing Address

Eastern Kentucky Regional Medical Examiner's Office (EKME) Central Laboratory Facility 100 Sower Blvd, STE 202 Frankfort, KY 40601



^{**}As of May 2017, the OCME no longer provides medical examiner coverage for any Southern Indiana county.

Phone Numbers

Telephone: (502) 564-4545

Fax: (502) 564-1699

Regional Coverage

The EKME covers the following **EASTERN** counties:

Anderson, Bath, Bell, Bourbon, Boyle, Boyd, Breathitt, Carter, Clark, Clay, Elliott, Estill, Fayette, Floyd, Franklin, Garrard, Harlan, Harrison, Jackson, Jessamine, Johnson, Knott, Knox, Laurel, Lawrence, Lee, Leslie, Letcher, Lincoln, Madison, Magoffin, Martin, McCreary, Menifee, Mercer, Montgomery, Morgan, Nicholas, Owsley, Perry, Pike, Powell, Pulaski, Rockcastle, Rowan, Scott, Washington, Wayne, Whitley, Wolf, and Woodford.

The Western Kentucky Regional Medical Examiners Office (WKME)

Physician/Doctorate Staff

• Christopher Kiefer, MD

Mailing Address

Western Kentucky Regional Medical Examiner's Office (WKME) 25 Brown Badgett Loop Madisonville, KY 42431

Phone Numbers

Telephone: (270) 824-7048

Fax: (270) 824-7092

Regional Coverage

The **WKME** in Madisonville office covers the following **WESTERN** counties:

Ballard, Caldwell, Calloway, Carlisle, Christian, Crittenden, Daviess, Fulton, Graves, Henderson, Hickman, Hopkins, Livingston, Logan, Lyon, Marshall, McCracken, McLean, Muhlenberg, Ohio, Todd, Trigg, Union, and Webster.

Weekend, holiday, and vacation coverage for the WKME office is provided by the OCME.

The Northern Kentucky Regional Medical Examiners Office (NKME)

Physician Doctorate/Staff

- No physician staff during 2017
 - This office was covered by the OCME and EKME for all of 2017.

Mailing Address

Northern Kentucky Regional Medical Examiner's Office (NKME) 85 North Grand Avenue Ft. Thomas, KY 41075

Phone Numbers

Telephone: (859) 572-3559

Fax: (859) 572-3558



Carlisle

Regional Coverage

The **NKME** in Ft. Thomas office covers the following **NORTHERN** counties:

Boone, Bracken, Campbell, Fleming, Gallatin, Grant, Greenup, Kenton, Lewis, Mason, Owen, Pendleton, and Robertson.

The NKME was not staffed during 2017. The office accepted cases only a few days a month in which the Chief Medical Examiner performed the examinations. All other days, cases from counties served by the NKME were sent to the EKME or OCME for examination.

Regions Northern Region Eastern Region Office of the Chief Medical Examiner Office of the Chief Medical Examiner-Southern IN* *As of May 2017, the OCME no longer provides ME coverage to Southern IN region. Western Region Regional Medical Examiner Office Trimble Orange Clark Oldham Harrison Bullitt Hancock Breckinridge Hardin Washingt Marion Olifo Pike Grayson Owsle Taylor **Hopkins** (Hart Butler Edmonson Muhlenberg Laurel Pulaski Leslie Adair Ballard McCracken

Barren Metcalfe

Monroe

Cumberland

McCreary

Whitley

Bell

Warren

Simpson

Allen

Christian

Trigg

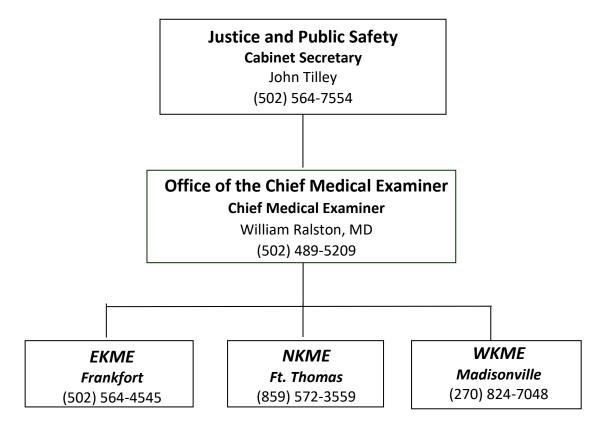
Calloway

Todd Logan

Figure 1. Regional Medical Examiner Office County Coverage



Figure 2. Office of the Medical Examiner Organizational Chart - 2017







Training and Education

The Medical Examiner's Division provides educational instruction in death investigation to coroners, law enforcement, medical, and social service agencies throughout the state. The Office of the Chief Medical Examiner plays an active role in the University of Louisville Department of Pathology educational programs and activities. Staff pathologists participate in the training of medical students, residents and fellows. Furthermore, the Eastern Kentucky Regional Medical Examiners Office plays an active role in the University of Kentucky, Department of Pathology.

Forensic Pathology Fellowship Program

The University of Louisville Division of Forensic Pathology Fellowship program is a one-year extensive training program in the subspecialty of forensic pathology. The trainee works with all of the attending physicians, gaining exposure to a wide spectrum of cases with various histories, causes, manners and mechanisms of death. The trainee is always supervised by one of the attending physicians in the autopsy room. The gross findings are discussed during the dissection, dictated at the table, and are signed out at the end of dissection. Case discussions are initiated prior to autopsy, and continued with staff and investigators through the multi-step process to the final report. The trainee is supervised throughout the process of interpretation of radiographs, microscopic slides, and toxicologic analysis. An attending pathologist always co-signs the final autopsy report with the trainee.

Accreditation

The Kentucky State Office of the Chief Medical Examiner in Louisville, KY is fully accredited by the National Association of Medical Examiners (NAME) through December 2017.

The University of Louisville Division of Forensic Pathology Fellowship Program at the Office of the Chief Medical Examiner in Louisville, KY is fully accredited by The Accreditation Council for Graduate Medical Education (ACGME) through April 2018.

Disclaimer

This report will present selected data routinely collected by the Medical Examiner Offices. The graphs and tables summarize data collected on all cases performed at the four regional offices.

This report does not represent all deaths occurring in Kentucky, nor all coroner reportable deaths, but rather only the cases investigated by the Kentucky Medical Examiner's Regional Offices. The coroners' offices only request medical examiner assistance on some, but not all coroner reportable deaths. Therefore, this report shall not be used for statewide fatality totals. For statewide totals, please contact:

Office of Vital Statistics 275 E. Main St. 1EA Frankfort, KY 40621 (502) 564-4212



Statewide Medical Examiner Data



Table 1. Total Medical Examiner (ME) Cases, 2017

Region	Count
OCME Louisville	1,376
EKME Frankfort	875
WKME Madisonville	186
NKME Ft. Thomas	34
State	2,471

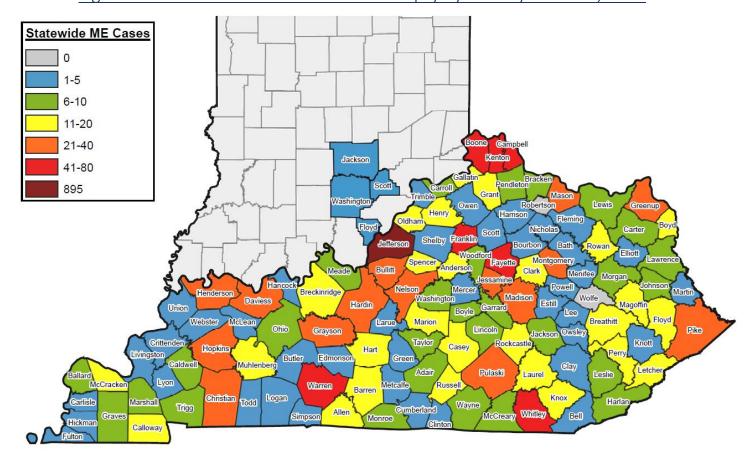
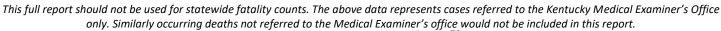


Figure 3. Statewide ME Cases Sent for Autopsy by Locality of Death, 2017





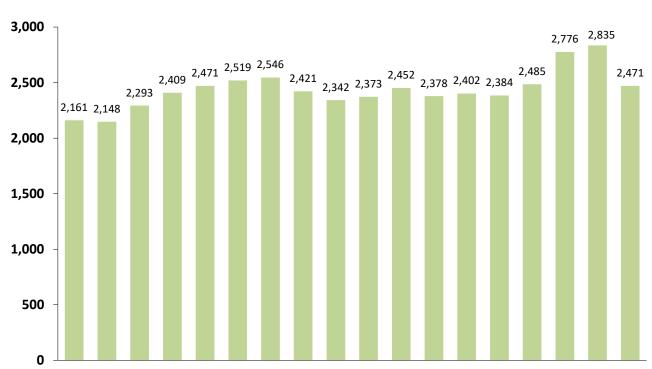


Figure 4. Statewide ME Cases by Year of Autopsy, 2000-2017



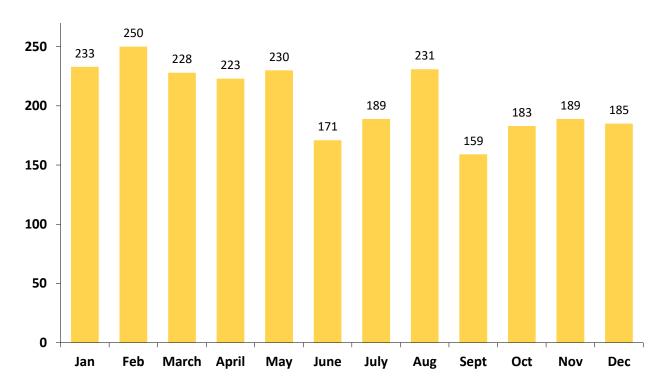




Table 2. Statewide ME Cases by Demographics, 2017

Category	Total	Percentage
Gender		
Male	1665	67.38%
Female	803	32.50%
Unknown ¹	3	0.12%
Age		
<1	114	4.61%
1-5	21	0.85%
6-12	31	1.25%
13-17	59	2.39%
18-24	206	8.34%
25-34	492	19.91%
35-44	562	22.74%
45-54	445	18.01%
55-64	318	12.87%
65-74	136	5.50%
75-84	59	2.39%
85-94	21	0.85%
>95	4	0.16%
Unknown ²	3	0.12%
Race		
White	2049	82.92%
Black	318	12.87%
Hispanic	55	2.23%
Asian	13	0.53%
Multi-Racial	17	0.69%
Other	5	0.20%
Unknown	14	0.57%

¹Gender unknown due to intrauterine fetal demise or unidentified, skeletonized adult remains.

This full report should not be used for statewide fatality counts. The above data represents cases referred to the Kentucky Medical Examiner's Office

²Age unknown due to unidentified, skeletonized adult remains.

■ Unknown Gender Male Female 1; 0.88% <1 73; 65.77% 37; 33.33% 1-5 12; 54.55% 10; 45.45% 6-12 24: 77.42% 7; 22.58% 13-17 34; 57.63% 25; 42.37% 20-24 156; 75.73% 50; 24.27% 25-34 349; 70.73% 144; 29.27% 35-44 357; 63.52% 205; 36.48% 45-54 302; 67.87% 143; 32.13% 55-64 211; 66.14% 108; 33.86% 89; 65.44% 65-74 47; 34.56% 75-84 40; 67.80% 19; 32.20% 85-94 14; 66.67% 7; 33.33% 95+ 3; 75.00% 1; 25.00% 2; 66.67% **Unkn Age** 1; 33.33%

Figure 6. Statewide ME Cases by Age and Gender, 2017

100

0

50

150

This full report should not be used for statewide fatality counts. The above data represents cases referred to the Kentucky Medical Examiner's Office only. Similarly occurring deaths not referred to the Medical Examiner's office would not be included in this report.



200

250

300

350

400

^{**1} unknown gender/<1 age consisted of intrauterine fetal demise.

^{**2} unknown gender/unknown age consisted of unidentified skeletonized adult remains.

^{**1} known gender/unknown age consisted of unidentified skeletonized adult remains.

Table 3. Statewide ME Cases by Manner of Death, 2017

Manner	Total	Percentage
Accident	1159	46.90%
Homicide	325	13.15%
Natural	513	20.76%
Suicide	295	11.94%
Undetermined (<1 year of age)	67	2.71%
Undetermined (1 year – Adult)	100	4.05%
Pending	12	0.49%
Skeletal remains of no forensic significance ¹	1	0.04%
TOTAL	2,471	

¹Skeletal remains of no forensic significance are not included in the total forensic caseload.

Figure 7. Statewide ME Cases by Manner of Death, 2017

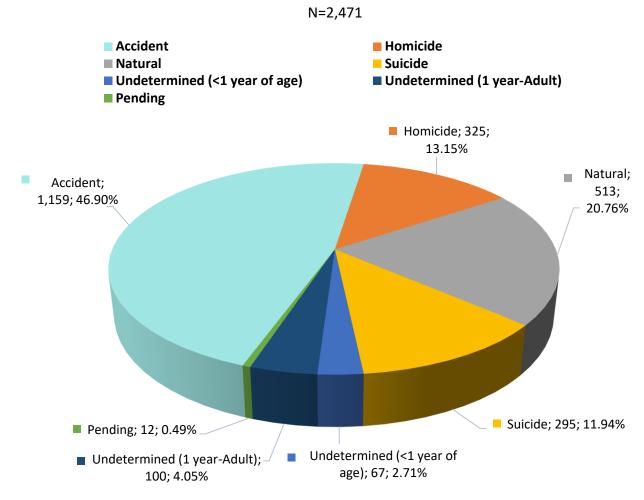




Table 4. Statewide ME Cases by Common Causes of Death, 2017

Cause of Death ¹	Total	Percentage
Motor Vehicle Collision (MVC)	312	12.63%
Gunshot Wound (GSW)	409	16.55%
Drowning	57	2.31%
Fire	40	1.62%
SUID	36	1.46%
Drug-Related	853	34.52%

¹The above causes of death are only representative of common causes and does not include all possible causes of death.

Accident Homicide Natural Suicide Undetermined Pending 3 2 3 1 100% 29 9 2 5 5 35 1 90% 64 6 5 80% 162 1 70% 60% 50% 36 296 722 40% 31 44 30% 238 20% 10% 2 0% MVC **GSW Drowning** Fire **SUDI Drug-Related**

Figure 8. Statewide ME Cases by Common Causes of Death and Manner, 2017¹⁻²



¹The above causes of death are only representative of common causes and does not include all possible causes of death.

²Some decedents may have more than one cause of death; therefore, those decedents may be represented multiple times in chart.

Table 5. Statewide ME Adult (>18) Homicides by Cause of Death, 2017

Cause of Death	Count	Percentage ¹
Gunshot Wound	219	76.57%
Sharp Force Injury	28	9.79%
Blunt Force Injury	28	9.79%
Asphyxia	12	4.20%
Neglect	4	1.40%
Fire	3	1.05%
Natural Event ²	2	0.70%
Unspecified Head Trauma	1	0.35%

¹Percentage is calculated using the total number of adult homicide deaths, n=286. Percentage may be >100% as some decedents may have more than one type of injury indicated as cause of death.

Table 6. Statewide ME Adult (>18) Suicides by Cause of Death, 2017

Cause of Death	Count	Percentage ¹
Gunshot Wound	151	54.32%
Asphyxia	67	24.10%
Drug-Related	32	11.51%
Sharp Force Injury	14	5.04%
Blunt Force Injury	5	1.80%
Drowning	5	1.80%
Pedestrian versus MVC	4	1.44%
Alcohol-Related	2	0.72%
Fire	1	0.36%
MVC	1	0.36%
Starvation	1	0.36%

¹Percentage is calculated using the total number of adult suicide deaths, n=278. Percentage may be >100% as some decedents may have more than one type of injury indicated as cause of death.



24

²Natural events and complications thereof occurring during or following an altercation/assault. Natural event may or may not be in the setting of natural disease.

Figure 9. Statewide ME Drug-Related Cases by Locality of Death, 2017

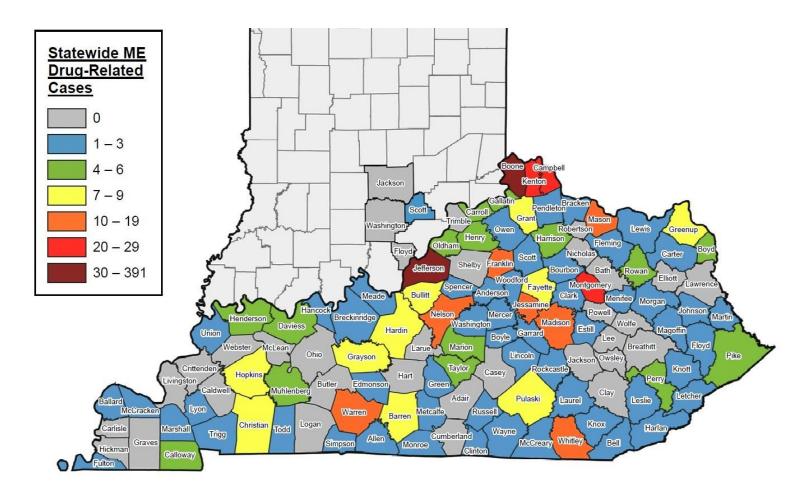




Table 7. Statewide ME Drug-Related Cases by Manner of Death, 2017¹

Manner	Total	Percentage
Accident	722	84.64%
Homicide	0	0.00%
Natural ²	64	7.50%
Suicide	35	4.10%
Undetermined	29	3.40%
Pending	3	0.35%
TOTAL	853	

¹Statewide drug-related total includes Indiana drug-related cases.

Table 8. Statewide ME Drug-Related Cases by Demographics, 2017¹

Category	Total	Percentage
Gender		
Male	523	61.31%
Female	330	38.69%
Unknown	0	0.00%
Age		
<17	3	0.35%
18-24	59	6.92%
25-34	238	27.90%
35-44	279	32.71%
45-54	172	20.16%
55-64	83	9.73%
65-74	18	2.11%
75-84	1	0.12%
85-94	0	0.00%
>95	0	0.00%
Unknown	0	0.00%
Race		
White	771	90.39%
Black	65	7.62%
Hispanic	8	0.94%
Asian	4	0.47%
Multi-Racial	2	0.23%
Other	0	0.00%
Unknown	3	0.35%

¹Statewide drug-related total includes Indiana drug-related cases.



²Natural manner of death involves individuals with chronic substance use and complications thereof.

Figure 10. Statewide ME Drug-Related Cases Involving Heroin by Locality of Death, 2017

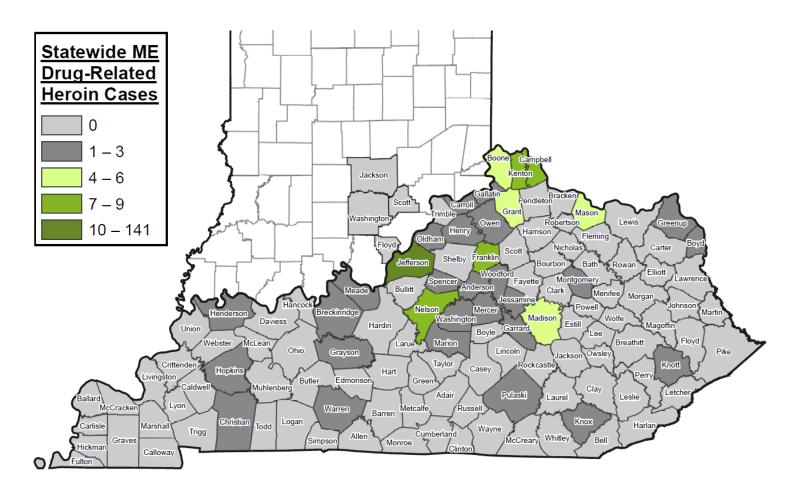




Table 9. Statewide ME Drug-Related Cases Involving Heroin by Manner of Death, 2017

Manner	Total	Percentage
Accident	216	95.58%
Homicide	0	0.00%
Natural ¹	2	0.88%
Suicide	2	0.88%
Undetermined	6	2.65%
Pending	0	0.00%
TOTAL	226	

¹Natural manner of death involves individuals with chronic substance use and complications thereof.

Table 10. Statewide ME Drug-Related Cases Involving Heroin by Demographics, 2017

Category	Total	Percentage
Gender		
Male	158	69.91%
Female	68	30.09%
Unknown	0	0.00%
Age		
<17	0	0.00%
18-24	22	9.73%
25-34	82	36.28%
35-44	71	31.42%
45-54	33	14.60%
55-64	14	6.19%
65-74	4	1.77%
75-84	0	0.00%
85-94	0	0.00%
>95	0	0.00%
Unknown	0	0.00%
Race		
White	207	91.59%
Black	15	6.64%
Hispanic	3	1.33%
Asian	1	0.44%
Multi-Racial	0	0.00%
Other	0	0.00%
Unknown	0	0.00%



Figure 11. Statewide ME Drug-Related Cases Involving Fentanyl by Locality of Death, 2017

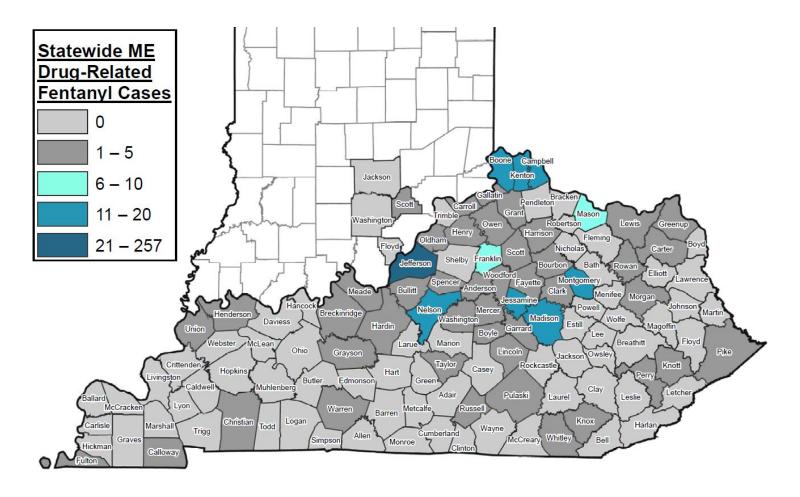




Table 11. Statewide ME Drug-Related Cases Involving Fentanyl by Manner of Death, 2017¹

Manner	Total	Percentage
Accident	436	94.99%
Homicide	0	0.00%
Natural ²	6	1.31%
Suicide	5	1.09%
Undetermined	10	2.18%
Pending	2	0.44%
TOTAL	459	

¹Statewide drug-related total includes Indiana drug-related cases.

Table 12. Statewide ME Drug-Related Cases Involving Fentanyl by Demographics, 2017¹

Category	Total	Percentage
Gender		
Male	303	66.01%
Female	156	33.99%
Unknown	0	0.00%
Age		
<17	1	0.22%
18-24	39	8.50%
25-34	150	32.68%
35-44	158	34.42%
45-54	73	15.90%
55-64	33	7.19%
65-74	5	1.09%
75-84	0	0.00%
85-94	0	0.00%
>95	0	0.00%
Unknown	0	0.00%
Race		
White	410	89.32%
Black	39	8.50%
Hispanic	4	0.87%
Asian	4	0.87%
Multi-Racial	1	0.22%
Other	0	0.00%
Unknown	1	0.22%

¹Statewide drug-related total includes Indiana drug-related cases.



²Natural manner of death involves individuals with chronic substance use and complications thereof.

Figure 12. Statewide ME Drug-Related Cases Involving Methamphetamine by Locality of Death, 2017

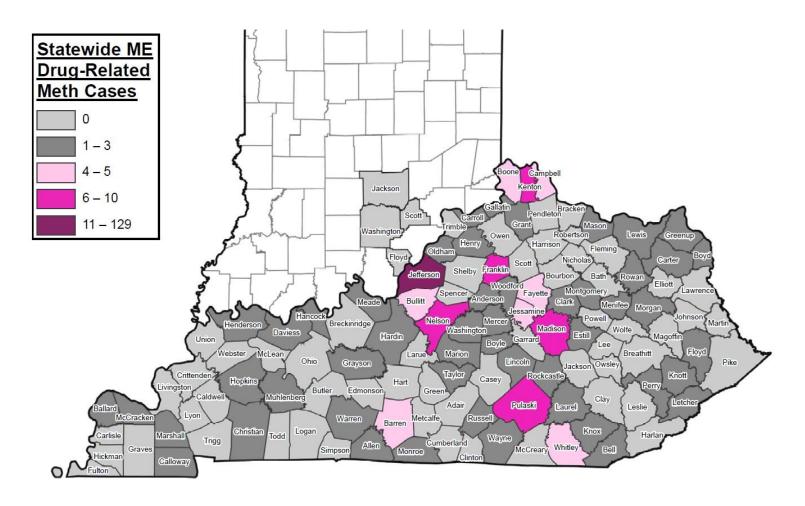




Table 13. Statewide ME Drug-Related Cases Involving Methamphetamine by Manner of Death, 2017

Manner	Total	Percentage
Accident	256	93.43%
Homicide	0	0.00%
Natural ¹	8	2.92%
Suicide	4	1.46%
Undetermined	5	1.82%
Pending	1	0.36%
TOTAL	274	

¹Natural manner of death involves individuals with chronic substance use and complications thereof.

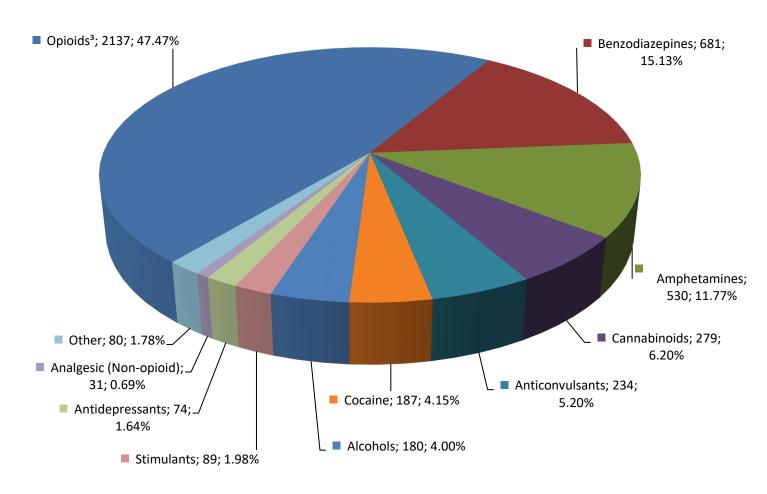
Table 14. Statewide ME Drug-Related Cases Involving Methamphetamine by Demographics, 2017

Category	Total	Percentage
Gender		
Male	188	66.43%
Female	95	33.57%
Unknown	0	0.00%
Age		
<17	1	0.35%
18-24	15	5.30%
25-34	108	38.16%
35-44	80	28.27%
45-54	60	21.20%
55-64	16	5.65%
65-74	3	1.06%
75-84	0	0.00%
85-94	0	0.00%
>95	0	0.00%
Unknown	0	0.00%
Race		
White	262	92.58%
Black	15	5.30%
Hispanic	4	1.41%
Asian	0	0.00%
Multi-Racial	0	0.00%
Other	0	0.00%
Unknown	2	0.71%



Figure 13. Most Common Drug Classes Detected in Statewide ME Drug-Related Cases, 2017¹⁻

2



¹Percentage is based off of the total number of drugs identified across all statewide ME drug-related cases (n=4,502).

This full report should not be used for statewide fatality counts. The above data represents cases referred to the Kentucky Medical Examiner's Office

²Detected drugs were found in blood, urine, and/or vitreous fluids.

³Opioids includes all opium-like substances (including natural opiates and synthetic opioids).

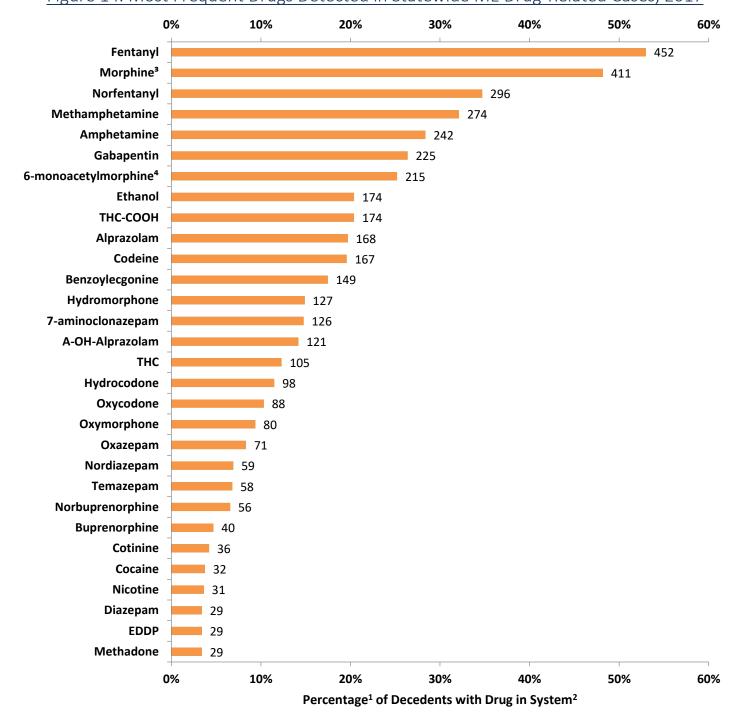


Figure 14. Most Frequent Drugs Detected in Statewide ME Drug-Related Cases, 2017



¹Percentage is based off the total number of statewide ME drug-related cases (n=853). Total Percentage >100% as cases may have more than one drug detected.

²Detected drugs were found in blood, urine, and/or vitreous fluids.

³Morphine represents true drug and/or metabolite of heroin.

⁴11 heroin cases do not have 6-monoacetylmorphine present in postmortem toxicology.

Figure 15. Statewide ME Motor Vehicle Collision Cases by Type, 2017
N=312

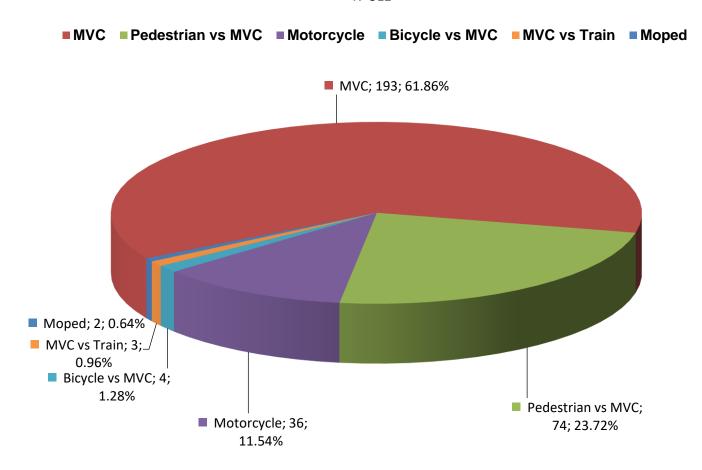




Table 15. Statewide ME Cases with Special Circumstances by Manners of Death, 2017

Fatal Event	Total	Percentage
Work-Related	13	0.53%
Accident	13	100.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%
Police-Involved	68	2.75%
Accident	17	25.00%
Homicide	20	29.41%
Natural	14	20.59%
Suicide	11	16.18%
Undetermined	6	8.82%
Pending	0	0.00%
Domestic Abuse	27	1.09%
Accident	0	0.00%
Homicide	18	66.67%
Natural	0	0.00%
Suicide	7	25.93%
Undetermined	2	7.41%
Pending	0	0.00%
Child Abuse	11	0.45%
Accident	0	0.00%
Homicide	11	100.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%
Nursing Home	4	0.16%
Accident	2	75.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	1	25.00%
Undetermined	0	0.00%
Pending	0	0.00%



Figure 16. Statewide ME Police-Involved Cases by Type of Police Involvement, 2017

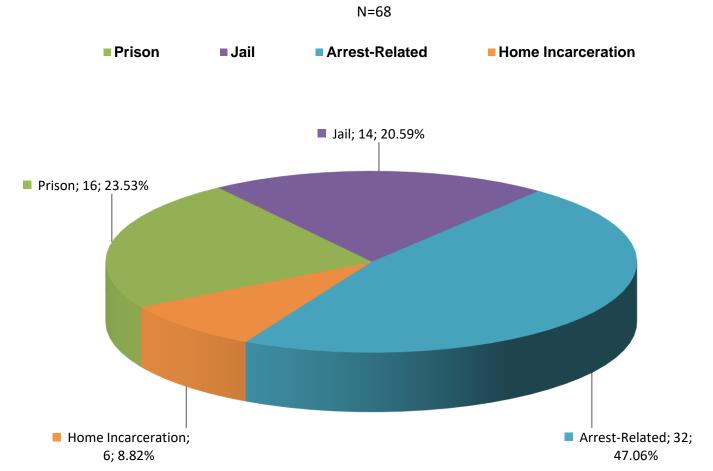




Figure 17. Statewide ME Police-Involved Cases by Demographics, 2017

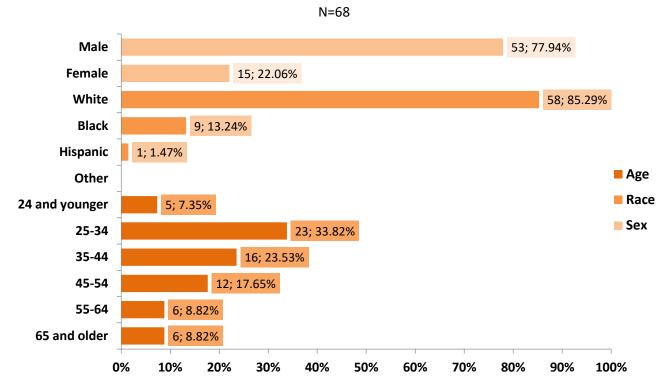
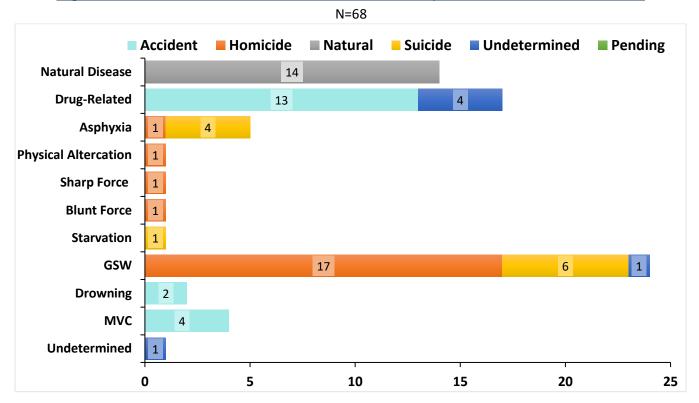


Figure 18. Statewide ME Police-Involved Cases by Cause and Manner, 2017¹



¹Three cases had multiple cause of death types (Drowning/MVC, Drowning/Drug-Related, and Asphyxia/Blunt Force)



Figure 19. Statewide ME Jail Cases by Demographics, 2017

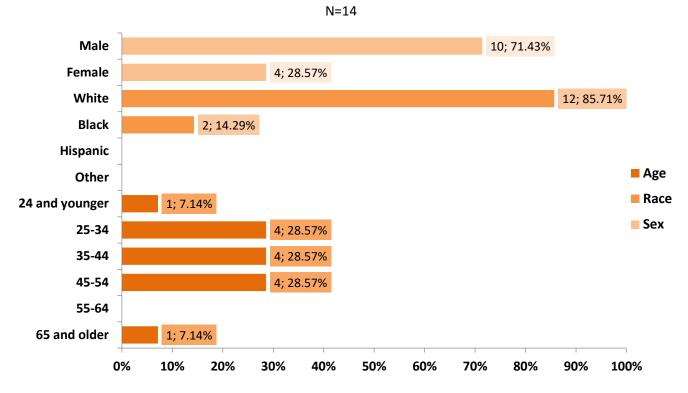


Figure 20. Statewide ME Jail Cases by Cause and Manner, 2017

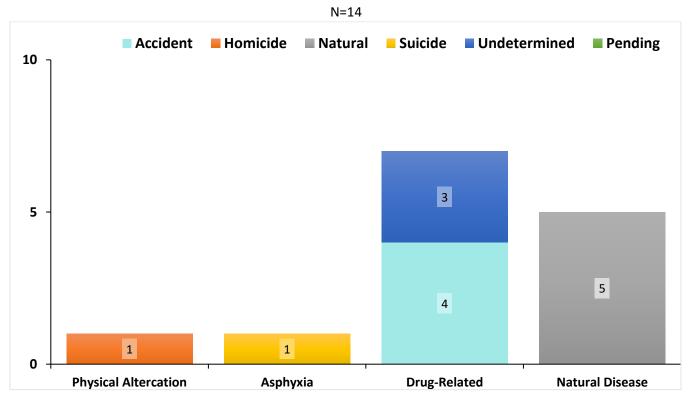




Figure 21. Statewide ME Prison Cases by Demographics, 2017

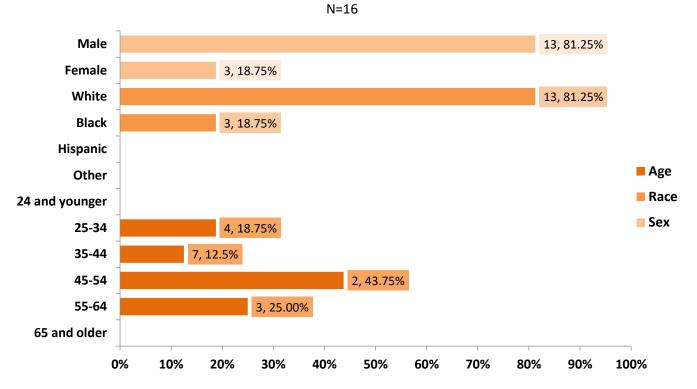
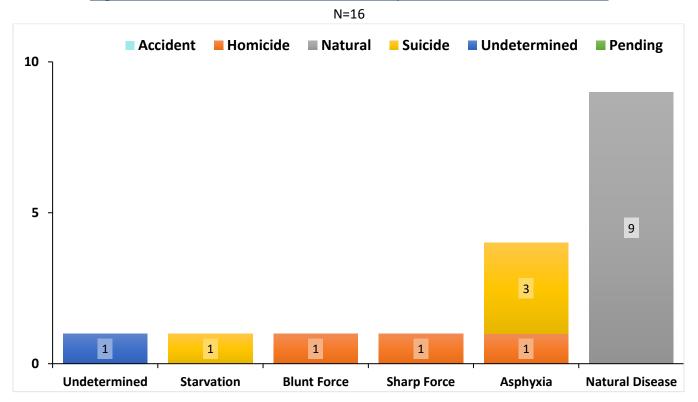


Figure 22. Statewide ME Prison Cases by Cause and Manner, 2017¹



¹One case had multiple cause of death types (Asphyxia/Blunt Force)



Figure 23. Statewide ME Arrest-Related Cases by Demographics, 2017

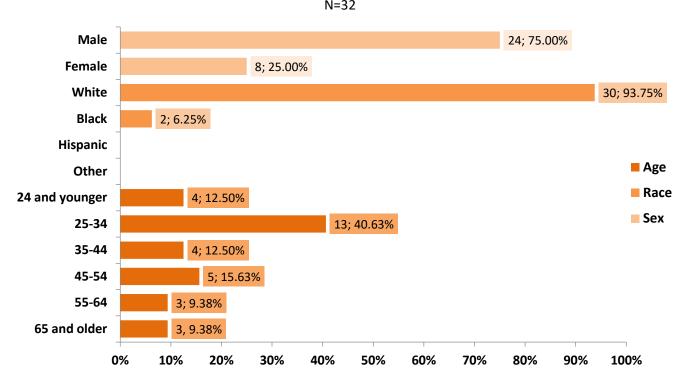
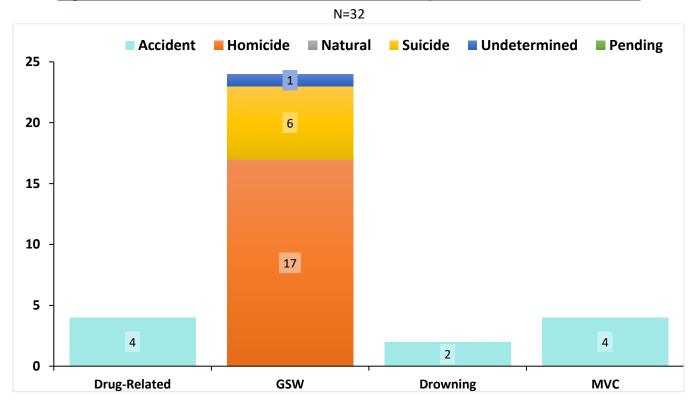


Figure 24. Statewide ME Arrest-Related Cases by Cause and Manner, 2017¹



¹Two cases had multiple cause of death types (Drowning/MVC and Drowning/Drug-Related)



Figure 25. Statewide ME Home Incarceration Cases by Demographics, 2017

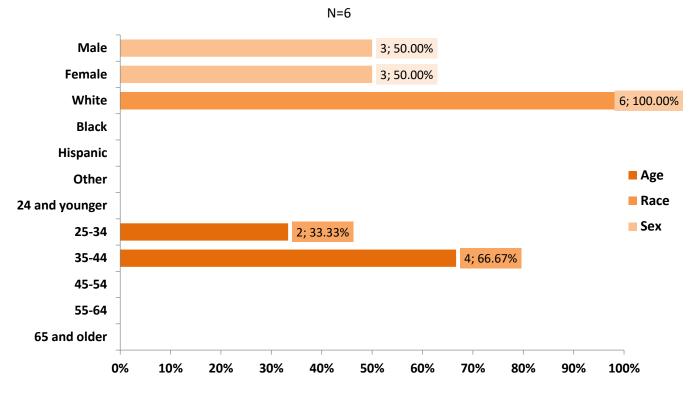
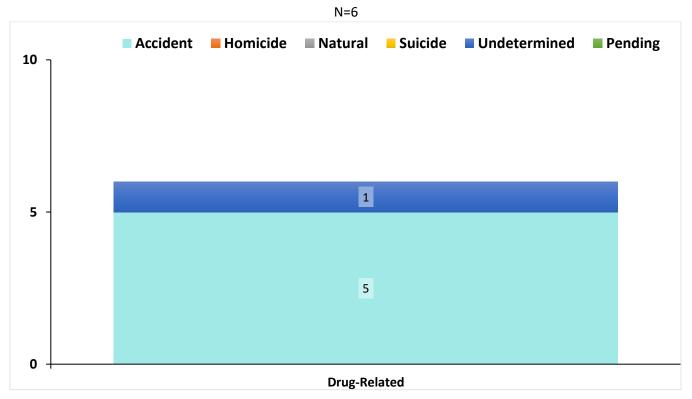


Figure 26. Statewide ME Home Incarceration Cases by Cause and Manner, 2017





Medical Examiner Data of Children (Birth – 17 years)



Table 16. Statewide ME Child (<18) Accidents by Cause of Death, 2017

N=70

Cause of Death	Count	Percentage ¹
Positional Asphyxia	25	35.71%
Motor Vehicle Collisions	24	34.29%
Drowning	8	11.43%
Fire	5	7.14%
Pedestrian v MVC	5	7.14%
Other Motor Collisions (bicycle, ATV, aircraft, etc)	5	7.14%
Drug-Related	1	1.43%
Gunshot Wound	1	1.43%

¹Percentage is calculated using the total number of child accident deaths, n=70. Percentage may be >100% as some decedents may have more than one type of injury indicated as cause of death.

Table 17. Statewide ME Child (<18) Homicides by Cause of Death, 2017

N = 39

Cause of Death	Count	Percentage ¹
Gunshot Wound	19	48.72%
Blunt Force Injury	10	25.64%
Sharp Force Injury	3	7.69%
Asphyxia	2	5.13%
Fire	2	5.13%
Drowning	1	2.56%
Abandonment	1	2.56%
Undetermined ²	1	2.56%

¹Percentage is calculated using the total number of child homicide deaths, n=39.

Table 18. Statewide ME Child (<18) Suicides by Cause of Death, 2017

N=17

Cause of Death	Count	Percentage ¹
Gunshot Wound	11	64.71%
Asphyxia	4	23.53%
Drug-Related	2	11.76%

¹Percentage is calculated using the total number of child suicide deaths, n=17.



²Undetermined cause of death, manner of death determined to be homicide based on circumstances.

Table 19. Statewide ME Child (<18) Undetermined Deaths by Cause of Death, 2017

Cause of Death	Count	Percentage ¹
Undetermined	34	47.22%
Consistent with SUDI	31	43.06%
Attributed to SUDI	5	6.94%
Hyperthermia	1	1.39%
Congenital ²	1	1.39%

¹Percentage is calculated using the total number of child undetermined deaths, n=72.

²It is unknown if other circumstances surrounding death contributed to cause of death, therefore manner is undetermined.

Figure 27. Statewide ME Child (<1 years) Cases by Causes of Death and Manner, 2017
N=110

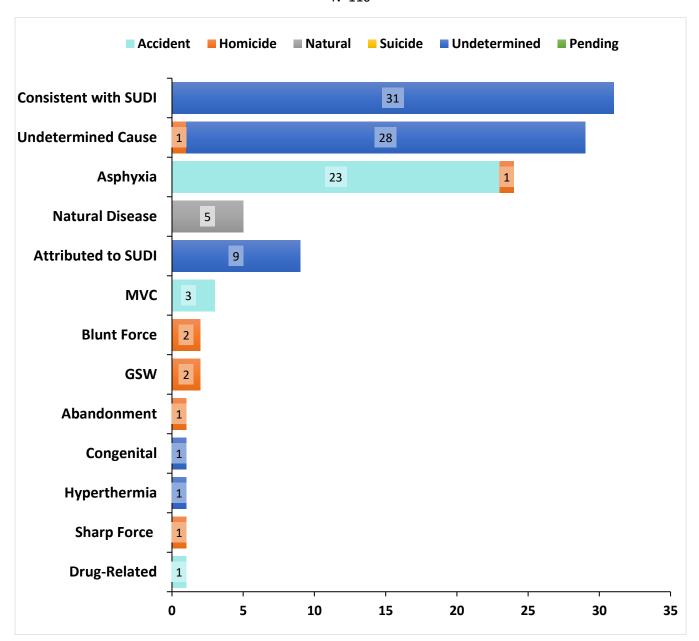




Figure 28. Statewide ME Child (1-5 years) Cases by Causes of Death and Manner, 2017
N=23

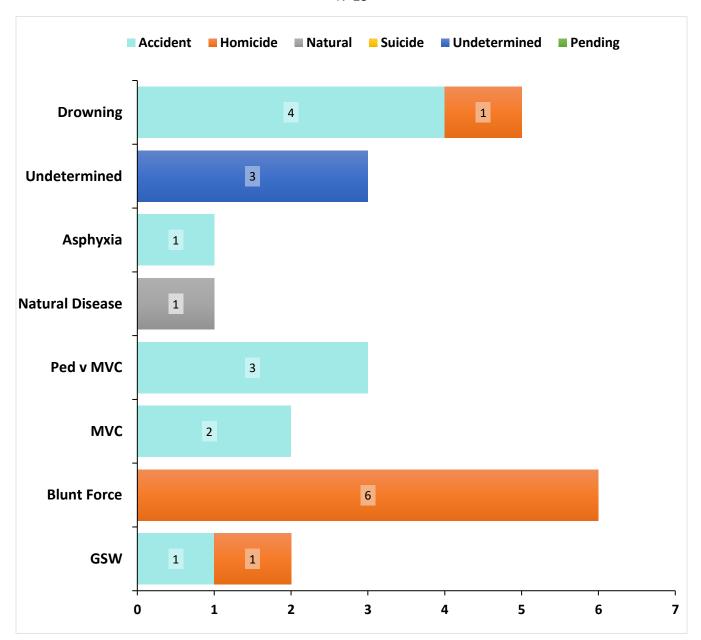




Figure 29. Statewide ME Child (6-12 years) Cases by Causes of Death and Manner, 2017
N=31

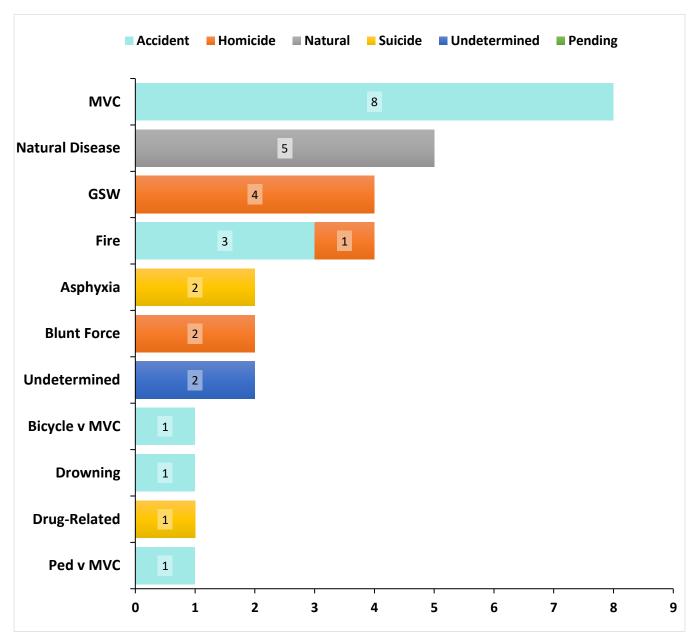
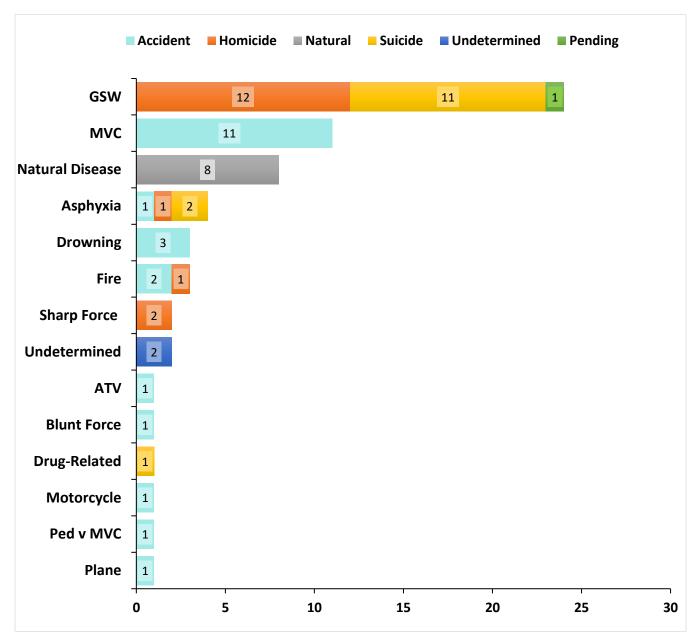




Figure 30. Statewide ME Child (13-17 years) Cases by Causes of Death and Manner, 2017¹



¹Count may be greater than n=59, as some decedents may have more than one type of injury indicated as cause of death.

This full report should not be used for statewide fatality counts. The above data represents cases referred to the Kentucky Medical Examiner's Office

only. Similarly occurring deaths not referred to the Medical Examiner's office would not be included in this report.

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Office of the Chief Medical Examiner Data



Figure 31. OCME Cases by Manner of Death, 2017





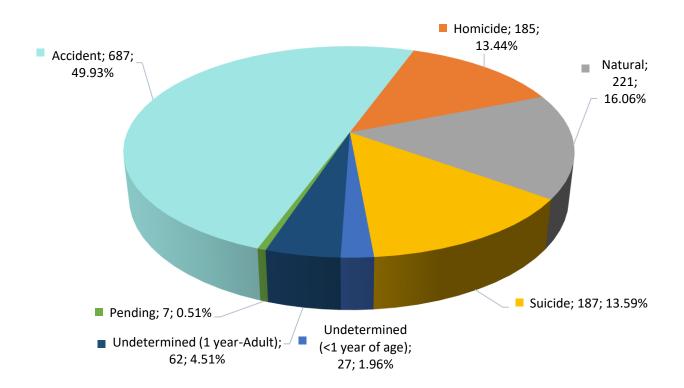




Table 20. OCME Cases by Common Causes of Death, 2017

Cause of Death ¹	Total	Percentage
Motor Vehicle Collision (MVC)	184	13.37%
Gunshot Wound (GSW)	240	17.44%
Drowning	22	1.60%
Fire	17	1.24%
SUID	18	1.31%
Drug-Related	538	39.10%
Involving Heroin	168	31.23%
Involving Fentanyl	311	57.81%
Involving Methamphetamine	178	33.09%

¹The above causes of death are only representative of common causes and does not include all possible causes of death.

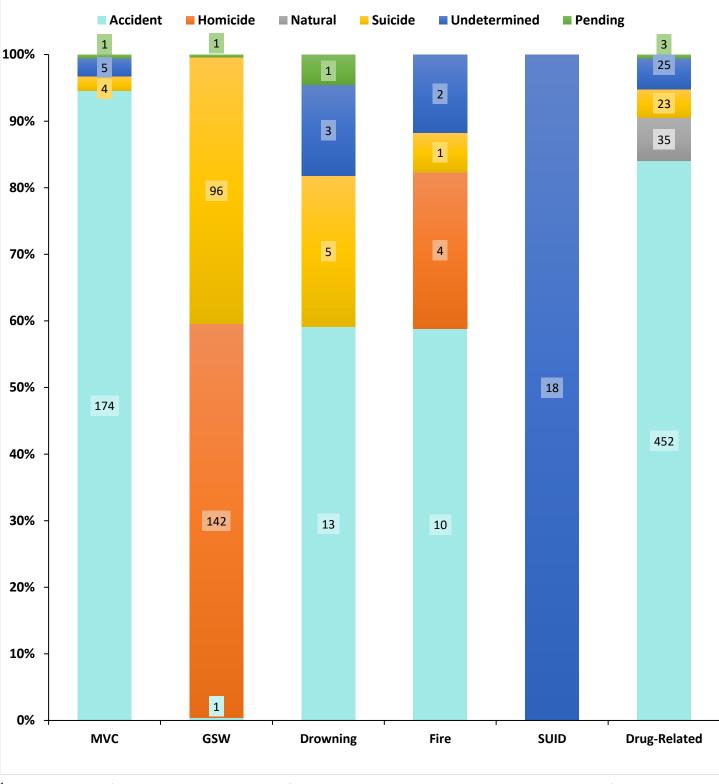


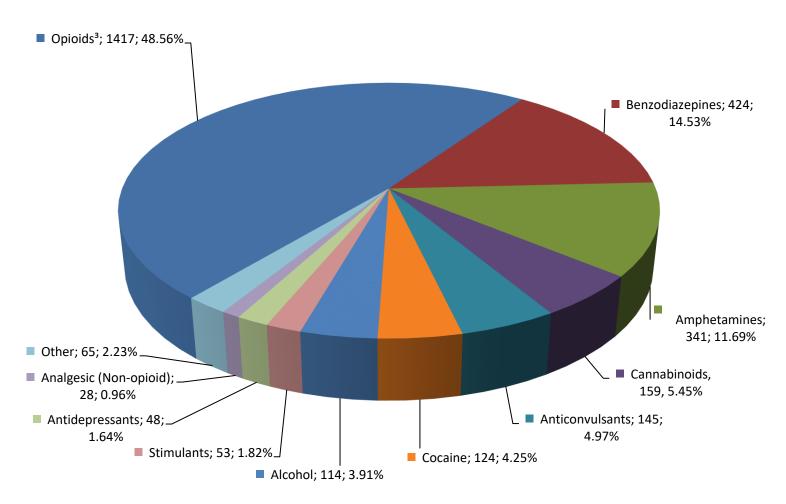
Figure 32. OCME Cases by Common Causes of Death and Manner, 2017¹⁻²



¹The above causes of death are only representative of common causes and does not include all possible causes of death.

²Some decedents may have more than one cause of death; therefore, those decedents may be represented multiple times in chart.

Figure 33. Most Common Drug Classes Detected in OCME Drug-Related Cases, 2017¹⁻²



¹Percentage is based off of the total number of drugs identified across all OCME drug-related cases (n=2,918).

This full report should not be used for statewide fatality counts. The above data represents cases referred to the Kentucky Medical Examiner's Office

only. Similarly occurring deaths not referred to the Medical Examiner's office would not be included in this report.

²Detected drugs were found in blood, urine, and/or vitreous fluids.

³Opioids includes all opium-like substances (including natural opiates and synthetic opioids).

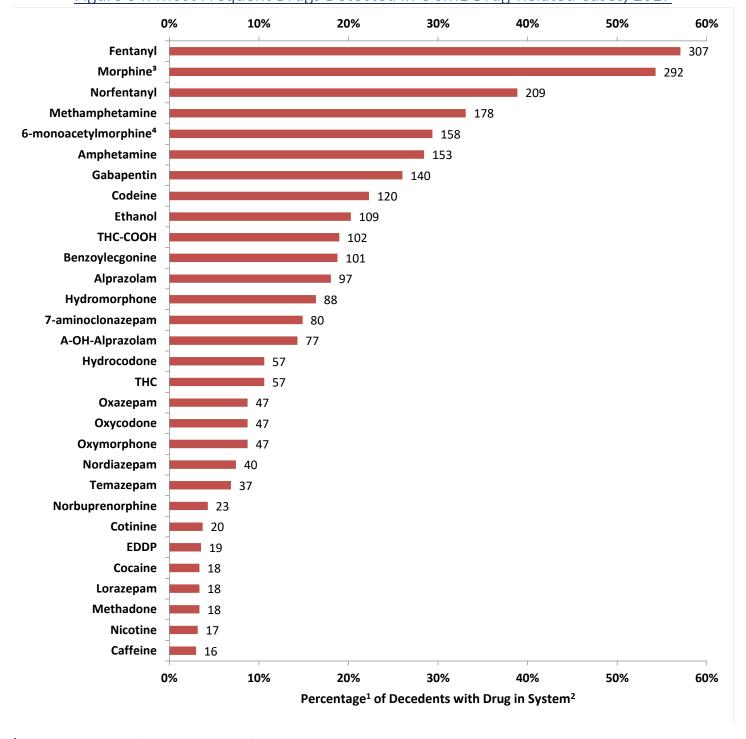


Figure 34. Most Frequent Drugs Detected in OCME Drug-Related Cases, 2017



¹Percentage is based off the total number of OCME drug-related cases (n=538). Total Percentage >100% as cases may have more than one drug detected.

²Detected drugs were found in blood, urine, and/or vitreous fluids.

³Morphine represents true drug and/or metabolite of heroin.

⁴10 heroin cases do not have 6-monoacetylmorphine present in postmortem toxicology.

Table 21. Additional Drugs Detected in OCME Drug-Related Cases, 2017¹⁻²

Drug Name	Total	Percentage	Drug Name	Total	Percentage
5F-ADB	1	0.19%	Ketorolac	1	0.19%
Acetaminophen	6	1.12%	Labetalol	1	0.19%
Acetone	4	0.74%	MDMA	2	0.37%
Acrylfentanyl	2	0.37%	Meprobamate	4	0.74%
Amiodarone	3	0.56%	Methoxyacetylfentanyl	1	0.19%
Amitriptyline	2	0.37%	Metoprolol	8	1.49%
Amlodipine	3	0.56%	Midazolam	2	0.37%
Baclofen	2	0.37%	Mirtazapine	1	0.19%
Brompheniramine	1	0.19%	Naloxone	7	1.30%
Buprenorphine	13	2.42%	Naproxen	1	0.19%
Bupropion	5	0.93%	Nifedipine	1	0.19%
Buspirone	2	0.37%	Nordoxepin	3	0.56%
Butalbital	1	0.19%	Norfluoxetine	3	0.56%
Carfentanil	3	0.56%	Norsertraline	3	0.56%
Chlordiazepoxide	1	0.19%	Nortramadol	4	0.74%
Chlorophenylpiperazine	3	0.56%	Nortriptyline	3	0.56%
Chlorothiazide	1	0.19%	O-Desmethylvenlafaxine	3	0.56%
Chlorpromazine	1	0.19%	Olanzapine	3	0.56%
Citalopram	6	1.12%	Paroxetine	1	0.19%
Clonazepam	12	2.23%	Phenobarbital	1	0.19%
Cocaethylene	5	0.93%	Phenytoin	2	0.37%
Cyclobenzaprine	4	0.74%	Pregabalin	1	0.19%
Dextromethorphan	1	0.19%	Promethazine	2	0.37%
Diazepam	15	2.79%	Propranolol	4	0.74%
Diphenhydramine	14	2.60%	Pseudoephedrine	6	1.12%
Doxepin	3	0.56%	Quetiapine	6	1.12%
Doxylamine	1	0.19%	Rocuronium	1	0.19%
Duloxetine	1	0.19%	Salicylates	1	0.19%
Ephedrine	2	0.37%	Sertraline	3	0.56%
Ethylene glycol	1	0.19%	Topiramate	2	0.37%
Fluoxetine	3	0.56%	Tramadol	5	0.93%
Furanylfentanyl	2	0.37%	Trazodone	2	0.37%
Hydrochlorothiazide	1	0.19%	U47700	2	0.37%
Hydroxyzine	2	0.37%	Venlafaxine	3	0.56%
Ibuprofen	1	0.19%	Warfarin	1	0.19%
Ketamine	1	0.19%	Zolpidem	3	0.56%

¹Percentage is based off the total number of OCME drug-related cases (n=538). Total Percentage >100% as cases may have more than one drug detected.

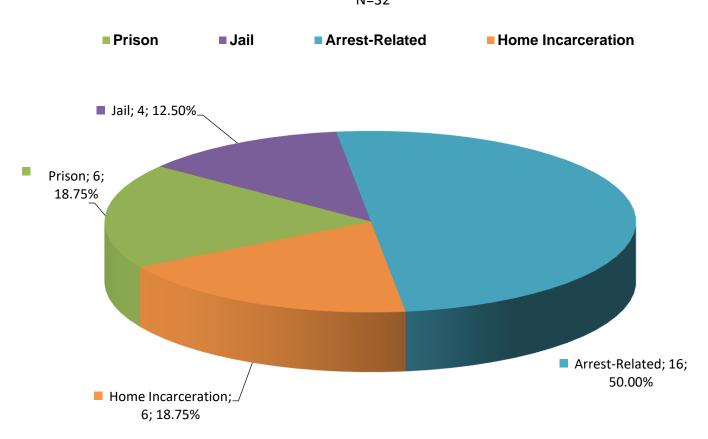
²Detected drugs were found in blood, urine, and/or vitreous fluids.

Table 22. OCME Cases with Special Circumstances by Manners of Death, 2017

Fatal Event	Total	Percentage
Work-Related	6	0.44%
Accident	6	100.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%
Police-Involved	32	2.33%
Accident	10	31.25%
Homicide	6	18.75%
Natural	4	12.50%
Suicide	8	25.00%
Undetermined	4	12.50%
Pending	0	0.00%
Domestic Abuse	15	1.09%
Accident	0	0.00%
Homicide	10	66.67%
Natural	0	0.00%
Suicide	5	33.33%
Undetermined	0	0.00%
Pending	0	0.00%
Child Abuse	7	0.51%
Accident	0	0.00%
Homicide	7	100.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%
Nursing Home	2	0.15%
Accident	1	50.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	1	50.00%
Undetermined	0	0.00%
Pending	0	0.00%



Figure 35. OCME Police-Involved Cases by Type of Police Involvement, 2017





Eastern Kentucky Regional Medical Examiner Data



Figure 36. EKME Cases by Manner of Death, 2017

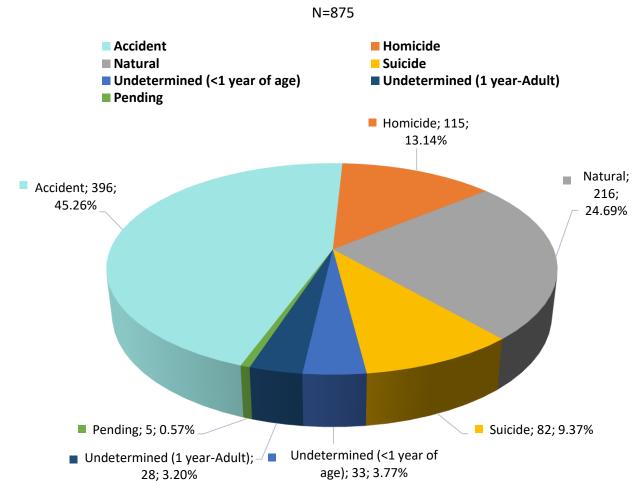




Table 23. EKME Cases by Common Causes of Death, 2017

Cause of Death ¹	Total	Percentage
Motor Vehicle Collision (MVC)	103	11.77%
Gunshot Wound (GSW)	139	15.89%
Drowning	31	3.54%
Fire	20	2.29%
SUID	17	1.94%
Drug-Related	263	30.06%
Involving Heroin	50	31.94%
Involving Fentanyl	134	50.95%
Involving Methamphetamine	80	30.42%

¹The above causes of death are only representative of common causes and does not include all possible causes of death.

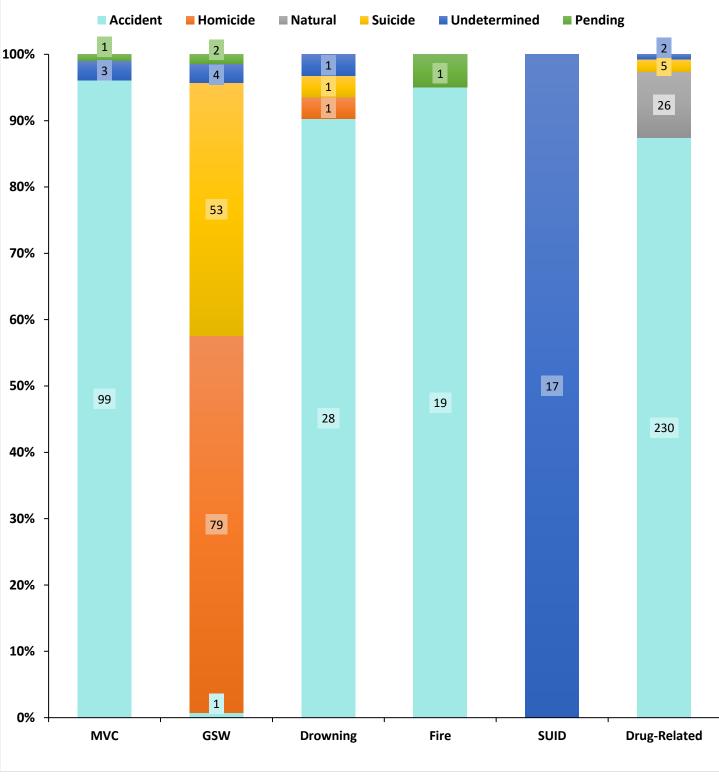


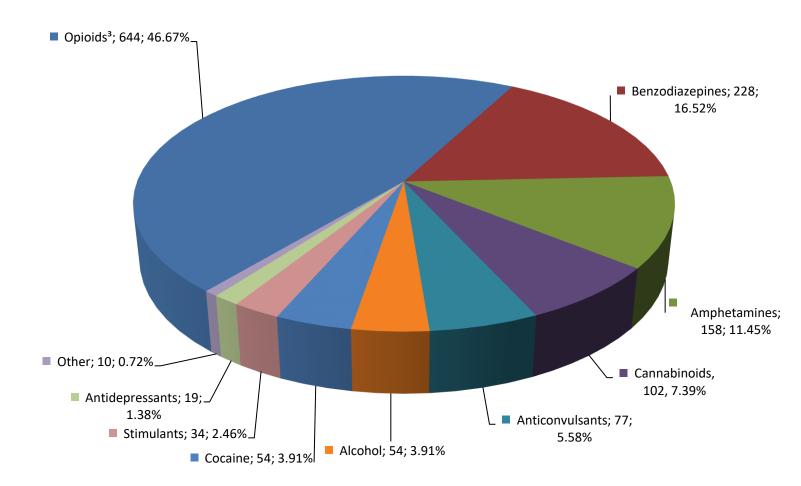
Figure 37. EKME Cases by Common Causes of Death and Manner, 2017¹⁻²



¹The above causes of death are only representative of common causes and does not include all possible causes of death.

²Some decedents may have more than one cause of death; therefore, those decedents may be represented multiple times in chart.

Figure 38. Most Common Drug Classes Detected in EKME Drug-Related Cases, 2017¹⁻²



¹Percentage is based off of the total number of drugs identified across all EKME drug-related cases (n=1,380).

²Detected drugs were found in blood, urine, and/or vitreous fluids.

³Opioids includes all opium-like substances (including natural opiates and synthetic opioids).

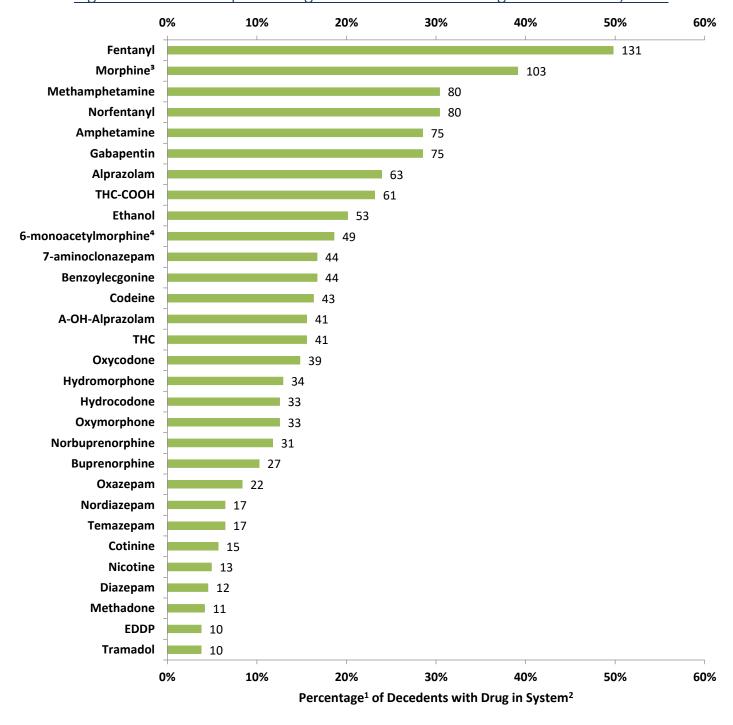


Figure 39. Most Frequent Drugs Detected in EKME Drug-Related Cases, 2017



¹Percentage is based off the total number of EKME drug-related cases (n=263). Total Percentage >100% as cases may have more than one drug detected.

²Detected drugs were found in blood, urine, and/or vitreous fluids.

³Morphine represents true drug and/or metabolite of heroin.

⁴1 heroin case does not have 6-monoacetylmorphine present in postmortem toxicology.

Table 24. Additional Drugs Detected in EKME Drug-Related Cases, 2017¹⁻²

1,1-difluorethane 1 0.38% Acetone 1 0.38% Amitriptyline 1 0.38% Bupropion 2 0.76% Caffeine 6 2.28% Carfentanil 3 1.14% Chlordiazepoxide 1 0.38% Chlorophenylpiperazine 1 0.38% Citalopram 6 2.28% Clonazepam 7 2.66% Cocaethylene 1 0.38% Cocaine 9 3.42% Cyclobenzaprine 1 0.38% Demoxepam 1 0.38% Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Levofloxacin 1 0.38% Levofloxacin 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Norfluoxetine 3 1.14% Norfluoxetine 3 1.14% Nortramadol 7 2.66% <tr< th=""><th>Drug Name</th><th>Total</th><th>Percentage</th></tr<>	Drug Name	Total	Percentage
Amitriptyline 1 0.38% Bupropion 2 0.76% Caffeine 6 2.28% Carfentanil 3 1.14% Chlordiazepoxide 1 0.38% Chlorophenylpiperazine 1 0.38% Citalopram 6 2.28% Clonazepam 7 2.66% Cocathylene 1 0.38% Cocaine 9 3.42% Cyclobenzaprine 1 0.38% Demoxepam 1 0.38% Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Levofloxacin 1 0.38% Levofloxacin 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Morpholol 1 0.38% Nortipotine 3 1.14% Nortriptyline 1 0.38% O-Desmethylvenlafaxine <td< td=""><td>1,1-difluorethane</td><td>1</td><td>0.38%</td></td<>	1,1-difluorethane	1	0.38%
Bupropion 2 0.76% Caffeine 6 2.28% Carfentanil 3 1.14% Chlordiazepoxide 1 0.38% Chlorophenylpiperazine 1 0.38% Citalopram 6 2.28% Clonazepam 7 2.66% Cocaethylene 1 0.38% Cocaine 9 3.42% Cyclobenzaprine 1 0.38% Demoxepam 1 0.38% Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Levofloxacin 1 0.38% Levofloxacin 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Norfluoxetine 3 1.14% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% O-Desmethylvenlafaxine <td>Acetone</td> <td>1</td> <td>0.38%</td>	Acetone	1	0.38%
Caffeine 6 2.28% Carfentanil 3 1.14% Chlordiazepoxide 1 0.38% Chlorophenylpiperazine 1 0.38% Citalopram 6 2.28% Clonazepam 7 2.66% Cocaethylene 1 0.38% Cocaine 9 3.42% Cyclobenzaprine 1 0.38% Demoxepam 1 0.38% Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Lamotrigine 1 0.38% Levofloxacin 1 0.38% Lorazepam 3 1.14% Lorazepam 3 1.14% MDMA 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine	Amitriptyline	1	0.38%
Carfentanil 3 1.14% Chlordiazepoxide 1 0.38% Chlorophenylpiperazine 1 0.38% Citalopram 6 2.28% Clonazepam 7 2.66% Cocaethylene 1 0.38% Cocaine 9 3.42% Cyclobenzaprine 1 0.38% Demoxepam 1 0.38% Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Levofloxacin 1 0.38% Levofloxacin 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin	Bupropion	2	0.76%
Chlordiazepoxide 1 0.38% Chlorophenylpiperazine 1 0.38% Citalopram 6 2.28% Clonazepam 7 2.66% Cocaethylene 1 0.38% Cocaine 9 3.42% Cyclobenzaprine 1 0.38% Demoxepam 1 0.38% Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Levofloxacin 1 0.38% Levofloxacin 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Norfluoxetine 3 1.14% Nortriptyline 1 0.38% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Premethazine	Caffeine	6	2.28%
Chlorophenylpiperazine 1 0.38% Citalopram 6 2.28% Clonazepam 7 2.66% Cocaethylene 1 0.38% Cocaine 9 3.42% Cyclobenzaprine 1 0.38% Demoxepam 1 0.38% Demoxepam 1 0.38% Duloxetine 1 0.38% Fluoxetine 1 0.38% Lamotrigine 1 0.38% Levofloxacin 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Norfluoxetine 3 1.14% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Promethazine 1 0.38% Pseudoephedrine <t< td=""><td>Carfentanil</td><td>3</td><td>1.14%</td></t<>	Carfentanil	3	1.14%
Citalopram 6 2.28% Clonazepam 7 2.66% Cocaethylene 1 0.38% Cocaine 9 3.42% Cyclobenzaprine 1 0.38% Demoxepam 1 0.38% Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Levofloxacin 1 0.38% Lidocaine 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Progabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2	Chlordiazepoxide	1	0.38%
Clonazepam 7 2.66% Cocaethylene 1 0.38% Cocaine 9 3.42% Cyclobenzaprine 1 0.38% Demoxepam 1 0.38% Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Lamotrigine 1 0.38% Levofloxacin 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Chlorophenylpiperazine	1	0.38%
Cocaethylene 1 0.38% Cocaine 9 3.42% Cyclobenzaprine 1 0.38% Demoxepam 1 0.38% Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Lamotrigine 1 0.38% Levofloxacin 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Citalopram	6	2.28%
Cocaine 9 3.42% Cyclobenzaprine 1 0.38% Demoxepam 1 0.38% Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Lamotrigine 1 0.38% Levofloxacin 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Clonazepam	7	2.66%
Cyclobenzaprine 1 0.38% Demoxepam 1 0.38% Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Lamotrigine 1 0.38% Levofloxacin 1 0.38% Lidocaine 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Cocaethylene	1	0.38%
Demoxepam 1 0.38% Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Lamotrigine 1 0.38% Levofloxacin 1 0.38% Lidocaine 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Cocaine	9	3.42%
Diphenhydramine 2 0.76% Duloxetine 1 0.38% Fluoxetine 1 0.38% Lamotrigine 1 0.38% Levofloxacin 1 0.38% Lidocaine 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Netoprolol 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Cyclobenzaprine	1	0.38%
Duloxetine 1 0.38% Fluoxetine 1 0.38% Lamotrigine 1 0.38% Levofloxacin 1 0.38% Lidocaine 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Demoxepam	1	0.38%
Fluoxetine 1 0.38% Lamotrigine 1 0.38% Levofloxacin 1 0.38% Lidocaine 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Diphenhydramine	2	0.76%
Lamotrigine 1 0.38% Levofloxacin 1 0.38% Lidocaine 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Duloxetine	1	0.38%
Levofloxacin 1 0.38% Lidocaine 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Fluoxetine	1	0.38%
Lidocaine 1 0.38% Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Lamotrigine	1	0.38%
Lorazepam 3 1.14% MDMA 1 0.38% Metoprolol 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Levofloxacin	1	0.38%
MDMA 1 0.38% Metoprolol 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Lidocaine	1	0.38%
Metoprolol 1 0.38% Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Lorazepam	3	1.14%
Naloxone 1 0.38% Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	MDMA	1	0.38%
Norfluoxetine 3 1.14% Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Metoprolol	1	0.38%
Nortramadol 7 2.66% Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Naloxone	1	0.38%
Nortriptyline 1 0.38% O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Norfluoxetine	3	1.14%
O-Desmethylvenlafaxine 1 0.38% Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Nortramadol	7	2.66%
Olanzapine 1 0.38% Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Nortriptyline	1	0.38%
Pregabalin 1 0.38% Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	O-Desmethylvenlafaxine	1	0.38%
Promethazine 1 0.38% Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Olanzapine	1	0.38%
Pseudoephedrine 2 0.76% Trazodone 1 0.38%	Pregabalin	1	0.38%
Trazodone 1 0.38%	Promethazine	1	0.38%
	Pseudoephedrine	2	0.76%
Venlafaxine 1 0.38%	Trazodone	1	0.38%
	Venlafaxine	1	0.38%

¹Percentage is based off the total number of EKME drug-related cases (n=263). Total Percentage >100% as cases may have more than one drug detected.



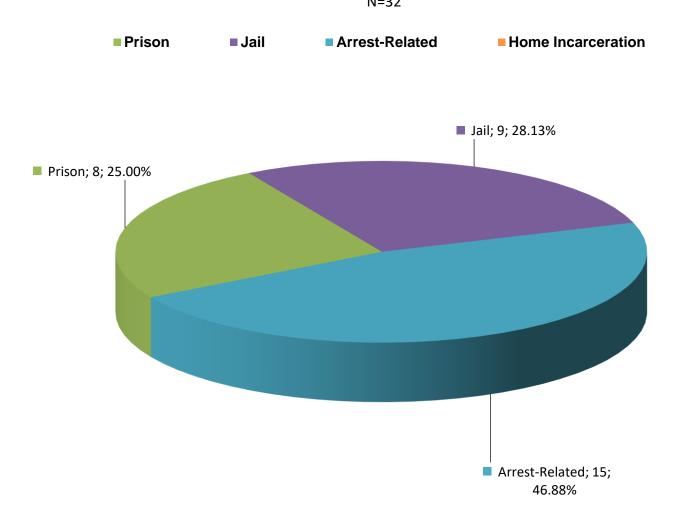
²Detected drugs were found in blood, urine, and/or vitreous fluids.

Table 25. EKME Cases with Special Circumstances by Manners of Death, 2017

Fatal Event	Total	Percentage
Work-Related	7	0.80%
Accident	7	100.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%
Police-Involved	32	3.66%
Accident	6	18.75%
Homicide	12	37.50%
Natural	10	31.25%
Suicide	2	6.25%
Undetermined	2	6.25%
Pending	0	0.00%
Domestic Abuse	4	0.46%
Accident	0	0.00%
Homicide	3	75.00%
Natural	0	0.00%
Suicide	1	25.00%
Undetermined	0	0.00%
Pending	0	0.00%
Child Abuse	3	0.34%
Accident	0	0.00%
Homicide	3	100.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%
Nursing Home	2	0.23%
Accident	2	100.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%



Figure 40. EKME Police-Involved Cases by Type of Police Involvement, 2017





Western Kentucky Regional Medical Examiner Data



Figure 41. WKME Cases by Manner of Death, 2017

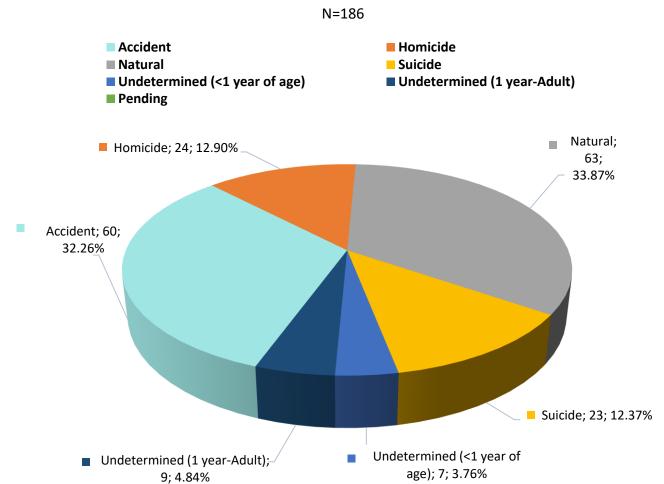




Table 26. WKME Cases by Common Causes of Death, 2017

Cause of Death ¹	Total	Percentage
Motor Vehicle Collision (MVC)	23	12.37%
Gunshot Wound (GSW)	27	14.52%
Drowning	4	2.15%
Fire	3	1.61%
SUID	3	1.61%
Drug-Related	38	20.43%
Involving Heroin	2	5.26%
Involving Fentanyl	4	10.53%
Involving Methamphetamine	13	39.47%

¹The above causes of death are only representative of common causes and does not include all possible causes of death.

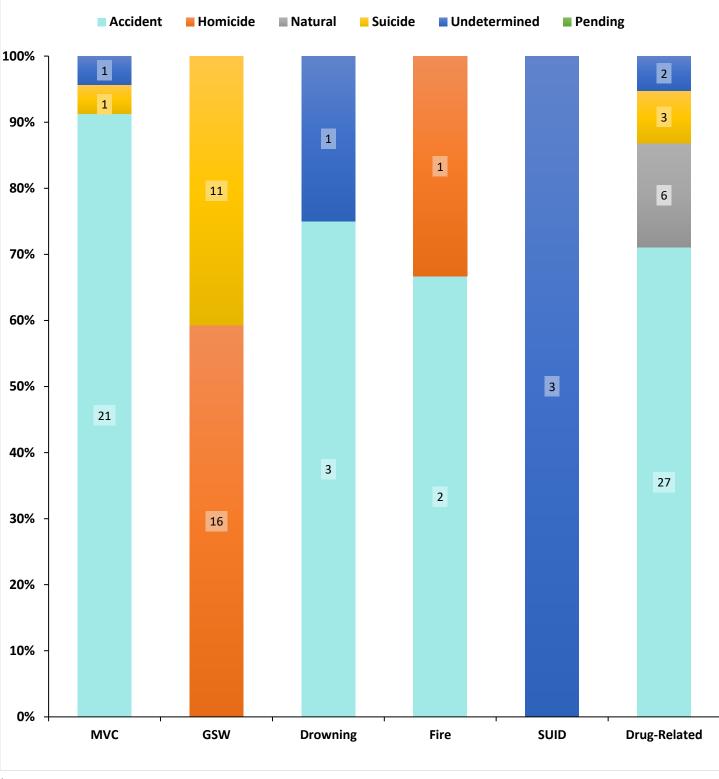


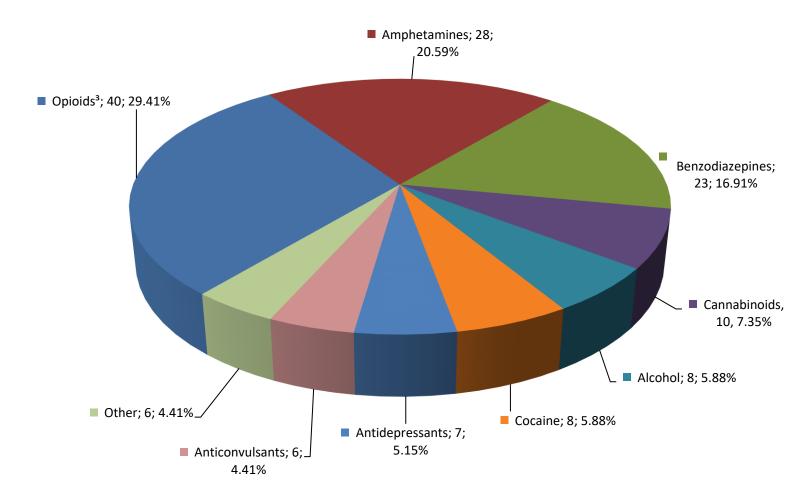
Figure 42. WKME Cases by Common Causes of Death and Manner, 2017¹⁻²



¹The above causes of death are only representative of common causes and does not include all possible causes of death.

²Some decedents may have more than one cause of death; therefore, those decedents may be represented multiple times in chart.

Figure 43. Most Common Drug Classes Detected in WKME Drug-Related Cases, 2017¹⁻²



¹Percentage is based off of the total number of drugs identified across all WKME drug-related cases (n=136).

This full report should not be used for statewide fatality counts. The above data represents cases referred to the Kentucky Medical Examiner's Office

²Detected drugs were found in blood, urine, and/or vitreous fluids.

³Opioids includes all opium-like substances (including natural opiates and synthetic opioids).

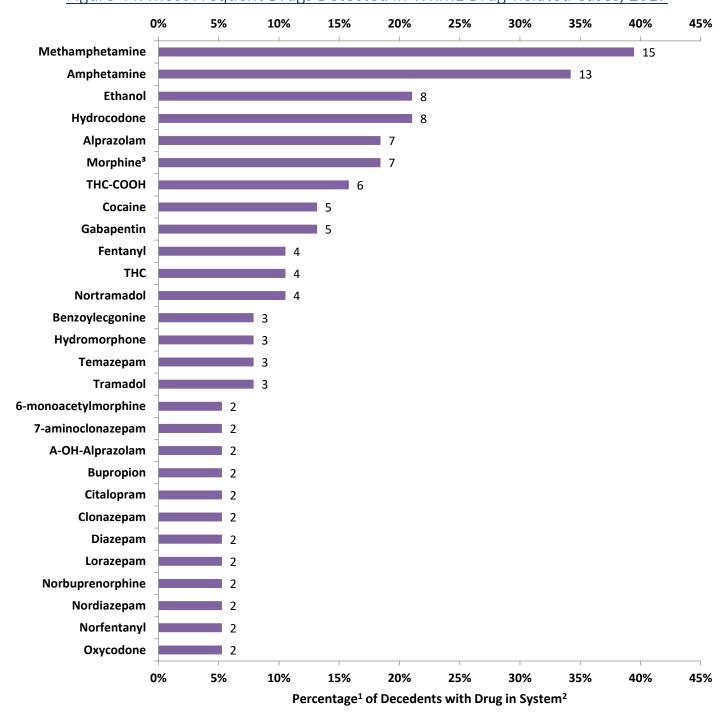


Figure 44. Most Frequent Drugs Detected in WKME Drug-Related Cases, 2017



¹Percentage is based off the total number of WKME drug-related cases (n=38). Total Percentage >100% as cases may have more than one drug detected.

²Detected drugs were found in blood, urine, and/or vitreous fluids.

³Morphine represents true drug and/or metabolite of heroin.

Table 27. Additional Drugs Detected in WKME Drug-Related Cases, 2017¹⁻²

Drug Name	Total	Percentage
Butalbital	1	2.63%
Carfentanil	1	2.63%
Codeine	1	2.63%
Doxylamine	1	2.63%
Fluoxetine	1	2.63%
Furanylfentanyl	1	2.63%
Hydroxyzine	1	2.63%
Levetiracetam	1	2.63%
Metoprolol	1	2.63%
Norfluoxetine	1	2.63%
Oxazepam	1	2.63%
Quetiapine	1	2.63%
Venlafaxine	1	2.63%
Verapamil	1	2.63%

¹Percentage is based off the total number of WKME drug-related cases (n=38). Total Percentage >100% as cases may have more than one drug detected.

This full report should not be used for statewide fatality counts. The above data represents cases referred to the Kentucky Medical Examiner's Office

²Detected drugs were found in blood, urine, and/or vitreous fluids.

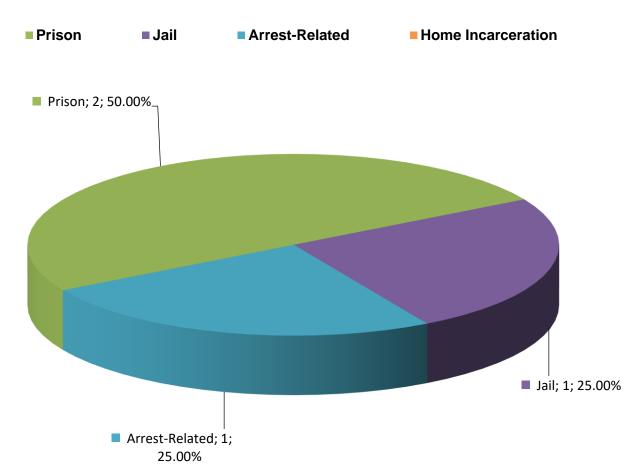
Table 28. WKME Cases with Special Circumstances by Manners of Death, 2017

Fatal Event	Total	Percentage
Work-Related	0	0.00%
Accident	0	0.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%
Police-Involved	4	2.15%
Accident	1	25.00%
Homicide	2	50.00%
Natural	0	0.00%
Suicide	1	25.00%
Undetermined	0	0.00%
Pending	0	0.00%
Domestic Abuse	8	4.30%
Accident	0	0.00%
Homicide	5	62.50%
Natural	0	0.00%
Suicide	2	25.00%
Undetermined	1	12.50%
Pending	0	0.00%
Child Abuse	1	0.54%
Accident	0	0.00%
Homicide	1	100.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%
Nursing Home	0	0.00%
Accident	0	0.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%



Figure 45. WKME Police-Involved Cases by Type of Police Involvement, 2017







Northern Kentucky Regional Medical Examiner Data



Figure 46. NKME Cases by Manner of Death, 2017

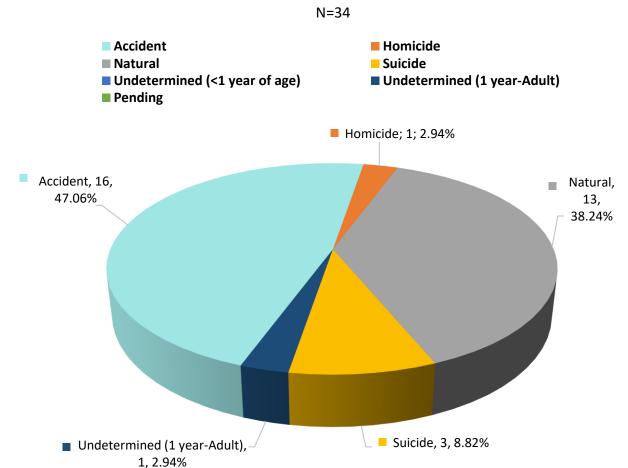




Table 29. NKME Cases by Common Causes of Death, 2017

Cause of Death ¹	Total	Percentage
Motor Vehicle Collision (MVC)	2	5.88%
Gunshot Wound (GSW)	3	8.88%
Drowning	0	0.00%
Fire	0	0.00%
SUID	0	0.00%
Drug-Related	14	41.18%
Involving Heroin	6	42.86%
Involving Fentanyl	10	71.43%
Involving Methamphetamine	1	7.14%

¹The above causes of death are only representative of common causes and does not include all possible causes of death.

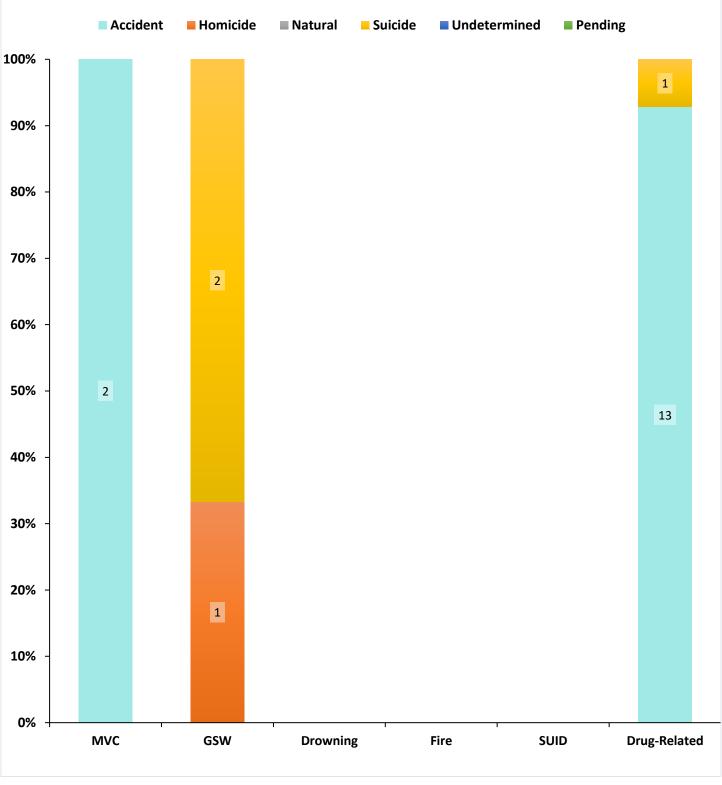


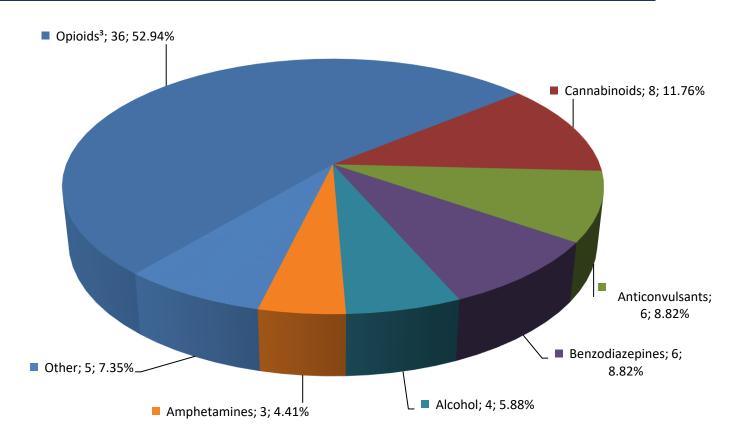
Figure 47. NKME Cases by Common Causes of Death and Manner, 2017¹⁻²



¹The above causes of death are only representative of common causes and does not include all possible causes of death.

²Some decedents may have more than one cause of death; therefore, those decedents may be represented multiple times in chart.

Figure 48. Most Common Drug Classes Detected in NKME Drug-Related Cases, 2017¹⁻²



¹Percentage is based off of the total number of drugs identified across all NKME drug-related cases (n=68).

²Detected drugs were found in blood, urine, and/or vitreous fluids.

³Opioids includes all opium-like substances (including natural opiates and synthetic opioids).

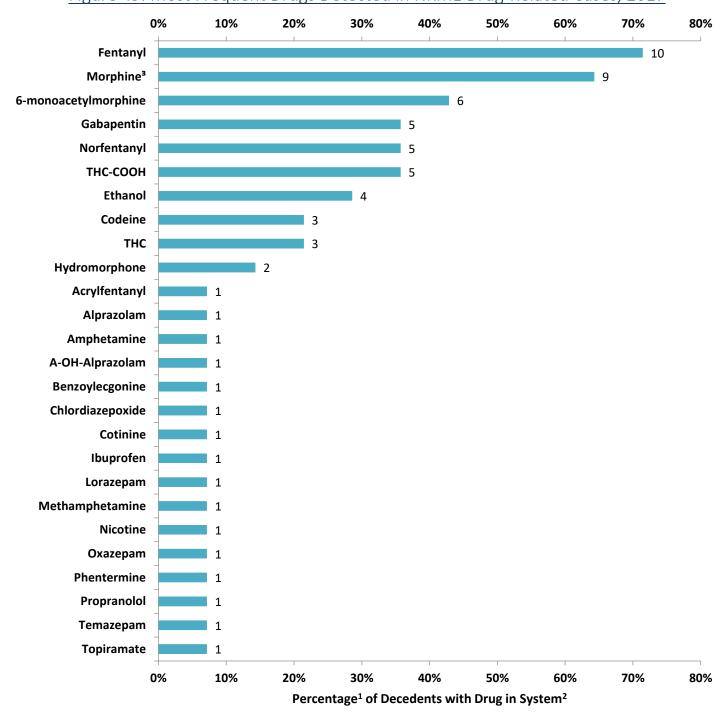


Figure 49. Most Frequent Drugs Detected in NKME Drug-Related Cases, 2017



¹Percentage is based off the total number of NKME drug-related cases (n=14). Total Percentage >100% as cases may have more than one drug detected.

²Detected drugs were found in blood, urine, and/or vitreous fluids.

³Morphine represents true drug and/or metabolite of heroin.

Table 30. Statewide ME Cases with Special Circumstances by Manners of Death, 2017

Fatal Event	Total	Percentage
Work-Related	0	0.00%
Accident	0	0.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%
Police-Involved	0	0.00%
Accident	0	0.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%
Domestic Abuse	0	0.00%
Accident	0	0.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%
Child Abuse	0	0.00%
Accident	0	0.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%
Nursing Home	0	0.00%
Accident	0	0.00%
Homicide	0	0.00%
Natural	0	0.00%
Suicide	0	0.00%
Undetermined	0	0.00%
Pending	0	0.00%



Additional Information



Additional Data for 2017

Scene Visits

In Kentucky, the county coroners and their deputies conduct the death investigations and scene visits. Kentucky's Department of Criminal Justice Training (DOCJT) trains coroners and deputy coroners. Scene visits by medical examiner regional offices are at the request of local law enforcement and/or county coroner.

- The OCME attended three (3) scenes.
- The Eastern Kentucky Office attended zero (0) scenes.
- The Western Kentucky Office attended zero (0) scenes.
- The Northern Kentucky Office attended zero (0) scenes.

Bodies Transported

Due to the combined Coroner/Medical Examiner system, no regional Medical Examiner Office transports bodies or arranges/orders the transport of bodies. This duty falls under the purview of the county coroner in which the death occurred. Therefore, zero (0) bodies were transported by any regional office.

Hospital Autopsies

Due to the combined Coroner/Medical Examiner system, the Regional Medical Examiner's Offices do not have jurisdiction over hospital deaths and autopsies. There were zero (0) hospital autopsies retained under ME jurisdiction.

Organ and Tissue Donation

- Of the 1,376 cases undergoing postmortem examinations by the OCME, 8 were organ donations, 25 were tissue donations, and 3 were both organ and tissue donations.
- Of the 875 cases undergoing postmortem examinations by the Eastern Kentucky Office, 3 were organ donations, 15 were tissue donations, and 3 were both organ and tissue donations.
- Of the 186 cases undergoing postmortem examinations by the Western Kentucky Office, 0 were organ donation, 4 were tissue donations, and 0 were both organ and tissue donation.
- Of the 34 cases undergoing postmortem examinations by the Northern Kentucky Office, 0 were organ donation, 0 were tissue donation, and 0 were both organ and tissue donation.

Unclaimed Bodies

Due to the combined Coroner/Medical Examiner system, the Regional Medical Examiner's Offices do not have responsibility over unclaimed bodies. This is the duty of the county coroner. Therefore, there were zero (0) unclaimed bodies in 2017.

Type of Postmortem Examination

Exhumations

- The OCME had zero (0) postmortem examinations from an exhumation in 2017.
- The Eastern Kentucky Office had zero (0) postmortem examinations from an exhumation in 2017.
- The Western Kentucky Office had zero (0) postmortem examinations from an exhumation in 2017.
- The Northern Kentucky Office had zero (0) postmortem examinations from an exhumation in 2017.



Complete Autopsies

- The OCME performed 1,074 complete autopsies in 2017.
- The Eastern Kentucky Office performed 625 complete autopsies in 2017.
- The Western Kentucky Office performed 149 complete autopsies in 2017.
- The Northern Kentucky Office performed 25 complete autopsies in 2017.

Focused Examinations

- The OCME performed 70 focused examinations in 2017.
- The Eastern Kentucky Office performed 75 focused examinations in 2017.
- The Western Kentucky Office performed 19 focused examinations in 2017.
- The Northern Kentucky Office performed 2 focused examinations in 2017.

External Autopsies

- The OCME performed 228 external examinations in 2017.
- The Eastern Kentucky Office performed 174 external examinations in 2017.
- The Western Kentucky Office performed 17 external examinations in 2017.
- The Northern Kentucky Office performed 7 external examinations in 2017.

Skeletal Remains Examinations

- The OCME performed 4 skeletal remains examinations.
- The Eastern Kentucky Office performed 1 skeletal remains examination.
- The Western Kentucky Office performed 1 skeletal remains examination.
- The Northern Kentucky Office performed 0 skeletal remains examinations.



Glossary

Autopsy – A detailed postmortem external and internal examination of a body to determine cause of death.

Manner of Death – The general category of the condition, circumstances or event, which causes the death. The categories are *accident*, *homicide*, *natural*, *suicide*, *pending*, *and undetermined*.

Accident – The *manner of death* used when, in other than *natural deaths*, there is no evidence of intent. The death occurs as a result of an unforeseen event.

Homicide – The *manner of death* used when, an act or omission directed at another person results in death. The medical examiner does not determine whether or not a criminal act has occurred.

Natural – The *manner of death* used when solely a disease causes death. If death is hastened by an injury, the *manner of death* is not considered natural.

Suicide – The manner of death in which death results from intentional act by one's self.

Pending – The *manner of death* is deferred because an ongoing investigation cannot be determined until ongoing investigation procedures immediately due to ongoing investigation procedures and is deferred until the investigation is complete.

Undetermined – The *manner of death* for deaths in which there is no clear determination of one manner over another.

Office of the Medical Examiner - the Office of the Medical Examiner investigates deaths occurring in the state of Kentucky, as authorized by Kentucky's elected coroners. The staff assists Kentucky coroners and law enforcement agencies in all aspects of death investigations by determining the cause and manner of death, identification of the deceased, and collection and interpretation of trace evidence.

Special Circumstances – When the death occurs in a special location or circumstance, such as deaths occurring in an institution, at the workplace, or in police custody.

